

Official Documents  
of the  
Pan American Health Organization  
No. 40

**PROPOSED PROGRAM AND BUDGET ESTIMATES**

PAN AMERICAN HEALTH ORGANIZATION, 1963  
WORLD HEALTH ORGANIZATION, REGION OF THE AMERICAS, 1964  
PAN AMERICAN HEALTH ORGANIZATION, PROVISIONAL DRAFT, 1964



**PAN AMERICAN HEALTH ORGANIZATION**  
Pan American Sanitary Bureau, Regional Office of the  
**WORLD HEALTH ORGANIZATION**  
Washington, D. C.  
July 1962

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**PAN AMERICAN HEALTH ORGANIZATION**  
Pan American Sanitary Bureau, Regional Office of the  
**WORLD HEALTH ORGANIZATION**  
1501 New Hampshire Ave., N.W.  
Washington 6, D. C., U. S. A.

ABBREVIATIONS

AID	Agency for International Development
AIDIS	Asociación Interamericana de Ingeniería Sanitaria
AMRO	The Americas Regional Office (Regional symbol for Intercountry and Interzone Projects)
BCG	Bacillus Calmette-Guerin
DDT	Dichlorodiphenyltrichloroethane
FAO	Food and Agriculture Organization
IADB	Inter-American Development Bank
ILO	International Labor Organization
INCAP	Institute of Nutrition of Central America and Panama
MCH	Maternal and Child Health
OAS	Organization of American States
PAHO	Pan American Health Organization
PASB	Pan American Sanitary Bureau
SCISP	Servicio Cooperativo Interamericano de Salud Pública
TPO	Tripartite Plan of Operations
UCWI	University College of the West Indies
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization
Ung	Ungraded
UNICEF	United Nations Children's Fund
USA	United States of America
USPHS	United States Public Health Service
WHO	World Health Organization
WHO/TA	World Health Organization/Technical Assistance

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## LETTER OF TRANSMITTAL

The Director of the Pan American Sanitary Bureau, Regional Office of the World Health Organization has the honor to present the following proposed program and budget estimates for consideration:

1. The proposed program and budget estimates of the Pan American Health Organization for the financial year 1963.
2. The proposed program and budget estimates of the World Health Organization for the Region of the Americas for the financial year 1964.
3. The provisional draft of the proposed program and budget estimates of the Pan American Health Organization for the financial year 1964.



Abraham Horwitz  
Director

INTRODUCTION

This program and budget has been developed within the approved policies and long-range program of the Organization, and in close cooperation with national health authorities. Special emphasis is given to the fundamental importance of health to social and economic development and to the formulation of health plans as part of the general development plans of countries.

This document presents a single functional program financed by several sources of funds administered by PAHO/WHO. Not reflected in this document, except for the funds shown in Annex 6, are large amounts currently and potentially available for health purposes through loans and grants for water systems, research, education of health personnel, mass eradication campaigns, community development and housing, and improvement in levels of nutrition. Significant amounts of time and energy of the Organization's staff are devoted to cooperation with other agencies and governments in planning these programs and in stimulating national and international financial support.

The program is presented as an integrated whole covering the three years 1962, 1963, and 1964. Information for 1962 includes the latest data available at the time of preparation of the document. The 1963 program was presented as an advance draft in the previous budget document OD 35 and has been revised to reflect current priorities and latest known desires and requirements of governments. The 1964 program represents the advance plan for that year.

Sources of funds are presented in four columns which are identified and explained as follows:

1. The Regular Budget of the Pan American Health Organization, including the Special Fund for Health Promotion appearing as Part IV of the budget with further detail in Annex 4. The level of this budget for 1963 and 1964 is discussed further on in this introduction.

2. Other Funds expected to be available to the PAHO for specified purposes (see also Annex 3) including: (a) the PAHO Special Malaria Fund supported by voluntary contributions of governments; (b) the Institute of Nutrition of Central America and Panama, supported by regular quota payments by its Member Countries and by grants from various sources; (c) the Program of Technical Cooperation of the Organization of American States; (d) the Community Water Supply Fund supported by voluntary contributions of governments; and (e) special grants made to PAHO for specific activities. Preliminary negotiations for grant funds for research, medical education and other health purposes are not reflected in this document.

3. The allocation to the Region of the Americas from the Regular Budget of the World Health Organization. The amount for 1963 represents an allocation from the funds appropriated in May of 1962 by the XV World Health Assembly. The 1964 program is intended for eventual incorporation in the WHO Program and Budget to be considered by the XVI World Health Assembly.

4. Technical Assistance Funds of the United Nations administered by WHO for projects in the Region of the Americas. The budget levels shown for technical assistance reflect project requirements as discussed with the respective ministries of health. The actual level of programs for 1963-1964 will depend on the amounts for health projects which the respective governments include in their requests to the Technical Assistance Board. Also included in this

column and identified by footnotes are funds for health projects (only one to date) financed by the U. N. Special Fund.

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The first portion of the budget, pages 12 through 33 presents tables to facilitate program analysis by related activity and according to the subject classification for projects used by the World Health Organization. Consideration is being given to a new program classification which will improve analysis of future budget documents by presenting projects and all other activities at Headquarters and Zone Offices in groups by program objectives.

The Budget Summary by Related Activity reflects a further decrease in the portion for administrative services to a figure of 8.3 per cent in the estimate for all funds in 1964. (The corresponding figure for 1954 when this summary was first presented was 16.4 per cent). Technical Services and Supply is planned to decrease to 12.9 per cent. Field Projects and Publications are continuing to increase and will reach 75.0 per cent if all the program funds become available.

Starting on page 14 the field projects are listed by subject; and budget estimates are displayed by major expense. These tables facilitate study of the nature and geographical distribution of activities under each subject. In addition to the country projects, these tables afford an impression of the intercountry projects (often referred to as AMRO projects because this prefix, which is used in the WHO project numbering system to designate the Americas Regional Office, is applied to all intercountry projects). The purpose of each AMRO project is set forth in the corresponding project narrative explanation. Some AMRO projects are for regional planning and promotion of country activities through long-term and short-term consultants, surveys, study groups, seminars, and research. Other AMRO projects promote training of health personnel through training centers, courses and special fellowships.

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For purposes of further analysis of the field program the proposed projects have been summarized in Tables A and B on page 3, arranged under the four major priorities assigned by the Governing Bodies of PAHO, with an additional heading for Foot-and-Mouth Disease Center. These tables, although valuable for comparative program analysis, have certain limitations. Primarily, it is necessary to bear in mind that integrated health services, which appear under one heading, involve also work in communicable diseases, maternal and child health, nursing services, health education, environmental sanitation, and other services.

Table A includes all funds which the Organization expends for its programs. Since, however, support for international health work in the Americas comes from voluntary contributions for specific activities and expenditure of these funds is limited to the particular objective, Table B has also been prepared to indicate the program distribution for the three funds - PAHO Regular, WHO Regular

and WHO/TA - in the use of which there is more discretion for program variation.

In the Communicable Diseases program the requirements for Malaria Eradication remain at a high level with an expected increase in 1964 over 1963. These requirements are based on two main factors: (a) the need for international advisory personnel during the surveillance period at levels very nearly the same as during spraying, and (b) the need for alternate methods of attack to interrupt transmission in certain areas through mass drug campaigns or larviciding.

As the concept of health as a positive element in social and economic development becomes more widely accepted the amount for Strengthening Health Services continues to rise. A large part of these activities is carried out through integrated health services which embrace a wide variety of public health subjects. These projects form the backbone of the long-range program of the Organization in strengthening basic health services. In addition, there are increasing numbers of projects for specialized services, the major ones of which are listed by subject and the remainder included under Other.

The importance of Environmental Sanitation and Nutrition is reflected by their size among the specialized services. In Environmental Sanitation, among other things, are included the Community Water Supply program and Housing. With respect to the latter, additional emphasis has been placed on collaboration with other agencies and national authorities in long-range planning of communities and urban areas. The integrated health projects also contain a considerable amount of environmental sanitation as shown in the footnote.

Maternal and child health, while highly important as an objective, is not listed as a separate subject because it is carried out largely through the integrated health projects. Attention is called to the increased emphasis on the subjects of Medical Care and Public Health Laboratory. An important program development, included under Other, is provision for regional and zone consultants and fellowships devoted to advising and assisting Ministries of Health in developing and organizing planning units, training national personnel for planning, and advising in preparation of national health plans.

Under the heading Education and Training are shown the estimates of those activities specifically connected with educational institutions for medicine, public health, and nursing, as well as other activities such as seminars, surveys, or fellowships for these basic professional fields. Besides the projects under the heading Education and Training, however, the total effort planned in educational activities is much greater. Actually, in any project carried out by the Organization the training of national personnel has the highest priority. This can be observed particularly in subjects such as integrated health services. In order to better appreciate the amount spent for the total training activities, a proportion has been estimated within each subject field for such activities as seminars, training courses, and fellowships which may be specifically identified as connected with training (Tables A and B). This column, which cuts across all the subject headings, has shown steady increase over the years.

It is believed that taken in total the field program represents a proper balance with respect to the needs of the countries and the resources and technical advisory nature of the Organization.

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Attention is called to the narrative explanations (starting on page 37) which describe reorganization of the Headquarters Office. Most notable items are: (a) establishment of an Office of Planning and an Office of Evaluation and Reports in the Office of the Director, (b) elimination of the Divisions of Education and Training and Public Health, leaving seven technical branches supervised by the Office of the Director, and (c) reorganization of Administration with the Office of the Chief and two branches. Changes in full-time personnel for all parts of the budget are reflected throughout the document and summarized in Annex 1.

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The PAHO Regular Program and Budget for 1963 was first presented as a provisional draft to the XIII Meeting of the Directing Council. Thereafter it was thoroughly reviewed and revised after consultation with each Government. Consequently, the proposed program and budget for 1963 reflects the latest known desires of Governments with due regard to the priorities of needs. In order to maintain the modest expansion of program of slightly over 5 per cent as compared to 1962, it was necessary, in addition to the normal increase in costs of about 4 per cent, to add an amount of \$250,000 to meet the new salary schedule. This refers to the salary schedule approved by the United Nations General Assembly, which, in accordance with established policy, was adopted by the World Health Organization and the Pan American Health Organization. The PAHO Regular budget comparison for the three years 1962, 1963, and 1964 is shown in Table C. Projects desired by Governments which could not be included in the budget proposals are shown in Annex 5.

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After careful study the 46th Executive Committee accepted the proposed PAHO Regular Program and Budget as being well-conceived and much-needed, taking into account the desires of Governments and the emphasis on national health planning as an integral part of social and economic development under the Charter of Punta del Este. The Committee in Resolution II recommended that the XVI Pan American Sanitary Conference establish the budget level of the Pan American Health Organization for 1963 at \$5,990,000.

This document is submitted to the XVI Pan American Sanitary Conference for: (1) review and final action on the proposed PAHO Regular Program and Budget for 1963; (2) review of all funds in the total proposed program for 1964, and observations and comments on its over-all content and balance; (3) examination and comment on the provisional draft of the Pan American Health Organization Regular Program and Budget for 1964, to guide the Director in the preparation of his proposed program and budget to be presented to the Executive Committee in the spring of 1963 and to the XIV Directing Council for consideration; and (4) examination and recommendations to the Director-General on the proposed WHO Regional program and budget for 1964.

ANALYSIS OF FIELD PROGRAM BY SUBJECT CLASSIFICATION

(1) Subject	TABLE A						TABLE B									
	All Funds - 1963		All Funds - 1964		PAHO Regular, WHO Regular and TA - 1963		PAHO Regular, WHO Regular and TA - 1964		PAHO Regular, WHO Regular and TA - 1963		PAHO Regular, WHO Regular and TA - 1964					
	(2) \$	(3) % Training Percentage	(4) \$	(5) % Training Percentage	(6) \$	(7) % Training Percentage	(8) \$	(9) % Training Percentage	(10) \$	(11) % Training Percentage	(12) \$	(13) % Training Percentage	(14) \$	(15) % Training Percentage	(16) \$	(17) % Training Percentage
Communicable Diseases	4,610,428	39.0	387,449	3.3	4,980,790	38.2	376,844	2.9	1,220,401	26.1	139,433	2.3	1,151,687	17.5	132,761	2.0
Eradication Programs	3,990,423	33.8	195,769	1.7	4,259,833	33.7	189,708	1.5	741,086	12.2	24,100	*	697,461	10.6		
Malaria	3,474,198	29.4	192,969	1.6	3,832,496	30.0	189,708	1.5	225,061	3.7			207,124	3.1		
Abies NEGRI	345,396	2.9	700	*	301,298	2.4			345,396	5.7			301,298	4.6		
Tave	124,428	1.1	2,100	*	117,808	.9			124,428	2.0	2,100	*	117,808	1.8		
Smallpox	46,601	.4			47,771	.4			46,601	.8			47,771	.7		
Other Communicable Diseases	619,805	5.2	191,680	1.6	580,957	4.5	187,096	1.4	478,915	7.9	137,333	2.3	454,226	6.9	132,761	2.0
Strengthening Health Services	5,634,321	47.7	1,963,855	16.6	6,063,481	47.5	2,335,259	18.3	4,009,396	66.0	1,694,764	27.9	4,459,646	68.0	2,041,906	31.1
Integrated Health Services	1,619,269	13.7	823,118	7.0	1,738,340	13.6	900,213	7.0	1,616,269	26.6	823,118	13.5	1,738,340	26.5	900,213	13.7
Nutrition	1,039,506	8.8	251,580	2.1	1,124,842	8.8	310,043	2.4	219,751	3.6	65,410	.8	226,611	3.4	51,410	.8
Statistics	458,690	3.9	65,410	.5	325,994	2.5	51,410	.4	227,332	3.7	45,410	.8	223,432	3.4	51,410	.8
Food and Drugs	25,100	.2	10,700	.1	24,000	.2	10,700	.1	25,100	.4	10,700	.2	24,000	.4	10,700	.2
Dental Health	51,709	.4	30,409	.2	75,308	.6	52,569	.4	42,809	.7	30,409	.5	62,009	.9	52,509	.8
Veterinary Public Health	144,406	1.2	32,521	.3	135,980	1.1	14,950	.1	144,406	2.4	32,521	.5	135,980	2.1	34,900	.5
Environmental Sanitation	975,781	8.3	214,014	1.8	1,199,359	9.4	316,957	2.5	461,097	7.6	139,444	2.3	588,845	9.0	214,197	3.3
Public Health Laboratory	163,139	1.4	50,105	.4	165,627	1.3	87,057	.7	163,139	2.7	90,105	1.5	165,627	2.5	87,057	1.3
Medical Care	155,855	1.3	29,000	.2	163,436	1.3	33,400	.3	155,855	2.6	29,000	.5	163,436	2.5	33,400	.5
Social and Occupational Health	283,410	2.4	27,786	.2	176,171	1.4	38,050	.3	283,410	4.7	27,786	.5	176,171	2.7	36,050	.6
Other	720,456	6.1	409,212	3.5	934,383	7.3	519,920	4.1	670,228	11.0	409,212	6.7	884,291	13.5	519,920	7.9
Education and Training	826,833	7.0	826,833	7.0	917,449	7.2	917,449	7.2	826,833	13.6	826,833	13.6	917,449	14.0	917,449	14.0
Medical	213,737	1.8	213,737	1.8	257,785	2.0	257,785	2.0	213,737	3.6	213,737	3.6	257,785	3.9	257,785	3.9
Public Health	209,832	1.8	209,832	1.8	204,560	1.6	204,560	1.6	209,832	3.5	209,832	3.5	204,560	3.1	204,560	3.1
Nursing	403,264	3.4	403,264	3.4	459,104	3.6	459,104	3.6	403,264	6.5	403,264	6.5	459,104	7.0	459,104	7.0
Research, Planning, and Coordination	65,446	.6			61,534	.5			15,504	.3			34,873	.5		
Foot-and-Mouth Disease Center	670,000	5.7	233,077	2.0	852,330	6.6	293,853	2.3								
TOTAL	11,807,028	100.0	3,411,214	28.9	12,775,584	100.0	3,923,405	30.7	6,076,134	100.0	2,663,030	43.8	6,563,655	100.0	3,092,116	47.1

\* .05 per cent or less.  
 † This item does not include the portion of Integrated Health projects devoted to Environmental Sanitation estimated at \$360,428 in 1963 and \$360,697 in 1964.

TABLE C  
PAHO REGULAR BUDGET

Budget Parts	1962		1963		Increase of 1963 over 1962		1964		Increase of 1964 over 1963	
	Appropriation	% of Total	Proposed	% of Total	Amount	%	Proposed	% of Total	Amount	%
	\$		\$		\$		\$		\$	
PART I	369,251	7.1	229,850	3.9	(139,401)	-	276,005	4.2	46,155	-
PART II	1,636,834	31.2	1,713,198	28.6	76,364	-	1,815,193	27.7	101,995	-
PART III	3,028,824	57.8	3,559,452	59.4	530,628	-	3,981,302	60.7	421,850	-
PART IV	187,500	3.6	187,500	3.1	-	-	187,500	2.9	-	-
PART V	17,591	.3	300,000	5.0	282,409	-	300,000	4.5	-	-
<b>TOTAL</b>	<b>5,240,000</b>	<b>100.0</b>	<b>5,990,000</b>	<b>100.0</b>	<b>750,000</b>	<b>14.3</b>	<b>6,560,000</b>	<b>100.0</b>	<b>570,000</b>	<b>9.5</b>

TABLE D  
ALL FUNDS

Fund	1962		1963		Increase of 1963 over 1962	1964		Increase of 1964 over 1963	
	Appropriation or Allocation	% of Total	Proposed	% of Total		Proposed	% of Total		
	\$		\$		%	\$		%	
<u>PAN AMERICAN HEALTH ORGANIZATION</u>									
Regular	5,240,000	36.4	5,990,000	37.1	14.3	6,560,000	37.8	9.5	
Other									
Community Water Supply	362,715	2.5	522,199	3.2	44.0	618,242	3.6	18.4	
Grants and Other Contributions to PAHO	698,648	4.8	552,453	3.4	(20.9)	371,446	2.1	(32.8)	
INCAP and Related Grants <sup>a/</sup>	628,767	4.4	797,620	4.9	26.8	828,231	4.8	3.8	
Organization of American States - Technical Cooperation Program	537,808	3.7	670,000	4.2	24.6	852,330	4.9	27.2	
Special Malaria Fund	3,107,296	21.6	3,290,901	20.4	5.9	3,634,909	20.9	10.4	
Subtotal	10,575,234	73.4	11,823,173	73.2	11.8	12,865,158	74.1	8.8	
<u>WORLD HEALTH ORGANIZATION</u>									
Regular	2,410,360	25.7	2,596,375	25.8	7.7	2,875,453	25.6	10.7	
Technical Assistance	1,289,848		1,558,304		20.8	1,576,024		1.1	
U.N. Special Fund	124,500	.9	161,700	1.0	29.9	52,900	.3	(67.3)	
<b>TOTAL</b>	<b>14,399,942</b>	<b>100.0</b>	<b>16,139,552</b>	<b>100.0</b>	<b>12.0</b>	<b>17,369,535</b>	<b>100.0</b>	<b>7.6</b>	

<sup>a/</sup> Includes approved grants for 1962 and assumes this level will be maintained in 1963 and 1964.

METHOD OF PREPARATIONForm of PresentationGeneral

The proposed program and budget estimates contained in this document are presented generally in the same manner as those of the previous budget document.

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In general, the material in the budget document is self-explanatory. However, some elaboration may be helpful with respect to the portion of the document entitled: "Narrative Explanations" and "Detailed Schedules".

Narrative Explanations

In this portion are the narrative explanations for all Parts of the program and budget. These are followed by the detailed schedules of budget estimates. The narrative explanations and the corresponding detailed schedules are cross-referenced.

Detailed Schedules

All the schedules include estimates over a three-year period. The first schedule is the "Summary - All Parts" which facilitates study of the entire budget in summary form by Part, Section and Chapter. The following schedules, starting with Part I, present detailed estimates for each activity.

For Part III of the budget, the presentation is made by zone, followed by the Section relating to Editorial Services and Publications. In each zone will be found the zone office, the country projects, and the intercountry projects operating within the zone. After the zones there are presented the schedules for country projects administered by the Washington Office, and the Interzone Programs.

Part IV is devoted to the Special Fund for Health Promotion. In order to avoid division of the field program the projects falling under Part IV are presented with the other field projects in Part III, under the respective country and intercountry headings. These projects are identified by footnotes, and the cost estimates are excluded from the totals for Part III. There is also a schedule presented as Annex 4 giving a list and estimated cost of all projects to be financed under Part IV.

Part V, Amount for Increasing the Working Capital Fund, is displayed in accordance with a decision of the XI Directing Council (Resolution VII).

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Method of Computation

All estimates are expressed in U.S. dollars.

For the year 1962 the latest allotment analyses completed prior to completion of this document serve as a basis for the estimates.

The situation as of 1 January 1962 has been used for projecting salaries and common staff costs for all established positions in Parts I and II and Sections 1 and 3 of Part III of the budget for the years 1963 and 1964. Posts are costed for the full year except for:

- a) new posts, if any, on PAHO Regular and Other Funds which are costed from 1 April of the year in which they are budgeted;
- b) new posts on WHO Regular projects, in which case a delay factor estimated at four months is applied;
- c) vacant posts on continuing Technical Assistance projects, which are costed from the dates they are expected to be filled;
- d) posts on new Technical Assistance projects, which are costed from the estimated starting date of the project;
- e) posts planned to be discontinued before the year-end, which are costed through the projected termination date.

For filled posts actual entitlements have been used in computing personnel costs. For vacant posts, the base salary of the appropriate grade has been used and for other personnel costs not computed on base salary, established averages have been used. The Table of Averages, prepared according to source of fund, follows. PAHO averages are based on experience of costs in the Americas, whereas WHO and WHO/TA averages are established by WHO Headquarters on the basis of world-wide experience. In accordance with Resolution VII of the 43rd Meeting of the Executive Committee provision has been made starting in 1963 for inclusion of dependents' allowances for general service staff at each of the Organization's stations. In some zones amounts have been included in anticipation of local wage increases.

Estimates for elements other than personnel are based on program requirements as planned.

Potential savings which may accrue from staff turnover and lapse in refilling vacant posts during the actual operating year are not reflected in the budget, since any such savings are used to cover accrued terminal leave payments, temporary personnel for zone offices, increments for language proficiency, additional children's allowances, education grants, and other imponderable factors for which no reasonable provision can be made in the budget.

The term common staff costs, referred to above, includes pension, staff insurance, post classification adjustment, assignment allowance, service benefit, repatriation grant, dependents' allowance, recruitment costs, home leave travel, and reimbursement of income tax.

As explained above, filled posts are individually calculated according to the actual entitlements of each incumbent. A review of budget and accounting procedures indicates that increased efficiency in planning, especially at the level of the country adviser and the zone office, as well as reduction in administrative costs can be achieved by using a simplified system of averages for personnel costs of filled posts. The system under consideration will provide for averages (by grade) for individual posts; these will be based on the actual total cost of all posts, so that the total budget estimate for personnel costs will be

the same as under the present system. The difference in the budget presentation would be that the estimated cost of a particular project or office might appear slightly above or below the actual cost, depending on the length of service, number of dependants, and other pertinent cost factors of staff members employed at such project or office. This small difference would not affect planning of individual activities or analysis of the budget according to program subject groups.

If further study confirms probable advantages, it is planned to apply a system of averages to posts under PAHO Regular Funds and PAHO Other Funds in preparing the next budget document. It would not be applied to posts under WHO, which are costed on a uniform system in all regions.

Information on the bases and methods of calculation will be presented to the Executive Committee for examination at the spring meeting.



TABLE OF AVERAGES

(Used in the costing of vacant professional posts, unless otherwise indicated.)

	Short-term Consultants	1/ Schedule "R" Assignments (Washington Office)	2/ Schedule "S" Assignments (Zone Offices)	Schedule "S" Assignments (Project staff)
	\$	All Grades \$	All Grades \$	All Grades \$
<u>Pan American Health Organization</u>				
Assignment allowance				
2/ Dependents' allowance		800	1,100	1,100
Recruitment and repatriation travel		1,500	800	800
Installation per diem		800	1,500	1,500
Home leave travel		1,100	800	800
Transportation of household effects		1,500	1,100	1,100
Fees	700 p.m.		--	--
Travel	900 p.m.			
<u>World Health Organization</u>				
3/ Assignment allowance				
2/ Dependents' allowance (including education grants and related travel)		720	1,300	1,300
Recruitment and repatriation travel		1,000	720	720
Installation per diem		550	1,000	1,000
Home leave travel		1,900	550	550
Transportation of personal effects		900	1,900	1,900
3/ Post adjustment		D-rate	--	--
4/ Repatriation grant (filled posts only)		D-rate	D-rate	D-rate
Fees	700 p.m.	100	100	100
Travel	900 p.m.	100	100	100

1/ Applies for staff with duty station in Washington, D. C.  
 2/ Applies for staff with duty station in the zone offices cities.

3/ Averages for full year; applies proportionately for shorter periods.  
 4/ Applicable to present incumbents eligible for this grant.

SCALE OF ASSESSMENTS OF THE  
MEMBER STATES OF THE PAN AMERICAN HEALTH  
ORGANIZATION FOR THE FINANCIAL YEAR ENDING  
31 DECEMBER 1963, BASED ON THE PAN AMERICAN  
UNION SCALE OF 1962-1963

TENTATIVE SCALE OF ASSESSMENTS OF THE  
MEMBER STATES OF THE PAN AMERICAN HEALTH  
ORGANIZATION FOR THE FINANCIAL YEAR ENDING  
31 DECEMBER 1964, BASED ON THE PAN AMERICAN  
UNION SCALE OF 1962-1963

Country	Percentage	Amount
	%	\$
Argentina	7.09	417,601
Bolivia	0.31	18,259
Brazil	7.81	460,009
Chile	1.97	116,033
Colombia	1.97	116,033
Costa Rica	0.31	18,259
Cuba	1.67	98,363
Dominican Republic	0.37	21,793
Ecuador	0.45	26,505
El Salvador	0.31	18,259
Guatemala	0.37	21,793
Haiti	0.31	18,259
Honduras	0.31	18,259
Mexico	5.61	330,429
Nicaragua	0.31	18,259
Panama	0.31	18,259
Paraguay	0.31	18,259
Peru	0.75	44,175
United States	66.00	3,887,400
Uruguay	0.83	48,887
Venezuela	2.63	154,907
	<u>100.00</u>	<u>5,890,000</u>

Assessments in respect to:

France	*	9,891
Kingdom of the Netherlands	*	6,435
United Kingdom	**	42,071
		<u>58,397</u>

In accordance with Article 60 of the Pan American Sanitary Code, the assessment scale adopted by the Council of the Organization of American States is binding upon the Member States of the Pan American Health Organization.

Country	Percentage	Amount
	%	\$
Argentina	7.09	458,014
Bolivia	0.31	20,026
Brazil	7.81	504,526
Chile	1.97	127,262
Colombia	1.97	127,262
Costa Rica	0.31	20,026
Cuba	1.67	107,882
Dominican Republic	0.37	23,902
Ecuador	0.45	29,070
El Salvador	0.31	20,026
Guatemala	0.37	23,902
Haiti	0.31	20,026
Honduras	0.31	20,026
Mexico	5.61	362,406
Nicaragua	0.31	20,026
Panama	0.31	20,026
Paraguay	0.31	20,026
Peru	0.75	48,450
United States	66.00	4,263,600
Uruguay	0.83	53,618
Venezuela	2.63	169,898
	<u>100.00</u>	<u>6,460,000</u>

Assessments in respect to:

France	*	10,837
Kingdom of the Netherlands	*	7,057
United Kingdom	**	46,142
		<u>64,036</u>

In accordance with Article 60 of the Pan American Sanitary Code, the assessment scale adopted by the Council of the Organization of American States is binding upon the Member States of the Pan American Health Organization. This scale which is presented for informational purposes only, is the 1962-1963 scale and is subject to review by the Council of the Organization of American States.

\* Amounts calculated in accordance with Resolutions XV and XL of the V Meeting of the Directing Council.

\*\* Amounts calculated in accordance with Resolutions XV and XL of the V Meeting of the Directing Council, and negotiations concluded with Representatives of the United Kingdom.

PROPOSED APPROPRIATION RESOLUTION

THE CONFERENCE,

## RESOLVES:

1. To appropriate for the financial year 1963 an amount of \$ \_\_\_\_\_ as follows:

Purpose of Appropriation

PART I	PAN AMERICAN HEALTH ORGANIZATION - ORGANIZATIONAL MEETINGS	
PART II	PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS	
PART III	PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS	
PART IV	PAN AMERICAN HEALTH ORGANIZATION - SPECIAL FUND FOR HEALTH PROMOTION	
PART V	PAN AMERICAN HEALTH ORGANIZATION - AMOUNT FOR INCREASING THE WORKING CAPITAL FUND	
	Total - All Parts	\$ _____
	<u>Less:</u>	
	Estimated Miscellaneous Income	\$ _____
	Contributions on behalf of France, Kingdom of the Netherlands, and the United Kingdom	_____
	Total	_____
	TOTAL FOR ASSESSMENT	\$ _____

2. Amounts not exceeding the appropriations noted under Paragraph 1 shall be available for the payment of obligations, in accordance with the Financial Regulations of the Organization, incurred during the period 1 January to 31 December 1963, inclusive.

3. The appropriations as noted above shall be financed by contributions from Member Governments according to Article 60 of the Pan American Sanitary Code; from contributions on behalf of France, Kingdom of the Netherlands and the United Kingdom according to Resolutions XV and XL of the V Meeting of the Directing Council, and miscellaneous income accruing to the Pan American Health Organization.

4. The Director is authorized to transfer credits between parts of the budget, provided that such transfers of credits between parts as are made do not exceed 10 per cent of the part from which the credit is transferred. Transfers of credits between parts of the budget in excess of 10 per cent may be made with the concurrence of the Executive Committee. All transfers of budget credits shall be reported to the Directing Council.



## **INFORMATIONAL SCHEDULES**

PAN AMERICAN HEALTH ORGANIZATION												BUDGET SUMMARY BY RELATED ACTIVITY
ESTIMATED EXPENDITURE												
REGULAR BUDGET						OTHER FUNDS						
1962		1963		1964		1962		1963		1964		
\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	
												GROUP I
												<u>Administrative Services</u>
217,797	4.2	217,573	3.6	215,883	3.3							Executive Offices
408,919	7.8	417,853	7.0	433,497	6.6	9,684	.2	10,086	.2			Administration (Excluding Supply Office)
5,580	.1	5,407	.1	5,922	.1							Temporary Personnel
146,610	2.8	172,505	2.9	232,625	3.5							Common Services - Headquarters
778,906	14.9	813,338	13.6	887,927	13.5	9,684	.2	10,086	.2			TOTAL - GROUP I
												GROUP II
												<u>Technical Services and Supply</u>
792,825	15.1	833,040	13.9	858,942	13.1	26,346	.5	11,656	.2	12,000	.2	Technical Services
57,533	1.1	59,227	1.0	59,946	1.0							Supply Office
7,570	.2	7,593	.2	8,378	.1							Temporary Personnel
890,666	17.0	684,238	11.4	707,905	10.7	74,945	1.4	70,537	1.2	71,229	1.1	Zone Offices
1,748,594	33.4	1,584,098	26.5	1,635,171	24.9	101,291	1.9	82,193	1.4	83,229	1.3	TOTAL - GROUP II
												GROUP III
												<u>Field Programs and Publications</u>
												<u>Programs</u>
9,783	.2	25,199	.4	17,469	.3	3,043,817	57.1	3,249,137	55.7	3,602,372	57.2	Malaria
60,111	1.1	65,669	1.1	69,294	1.0							Tuberculosis
		6,400	.1	24,060	.4							Verneal Diseases and Treponematoses
17,936	.3	500	*	3,700	.1							Bacterial Diseases
62,783	1.2	59,929	1.0	92,671	1.4	19,900	.4	32,196	.5	18,062	.3	Parasitic Diseases
30,791	.6	53,793	.9	11,120	.2							Virus Diseases
925,494	17.7	1,040,351	17.4	1,192,018	18.2	55,702	1.0					Leprosy
70,059	1.3	109,877	1.8	123,166	2.0	226,100	4.2	231,358	4.0	102,562	1.6	Public Health Administration
44,139	.8	31,200	.5	51,300	.8	28,020	.5	8,900	.1	12,400	.2	Vital and Health Statistics
98,490	1.9	253,216	4.2	311,786	4.8							Dental Health
27,862	.5	46,075	.8	53,373	.8							Nursing
18,500	.4	7,800	.1	7,800	.1							Social and Occupational Health
48,548	.9	55,905	.9	53,117	1.0	49,190	.9	50,228	.9	50,092	.8	Chronic and Degenerative Diseases
29,871	.6	36,738	.6	13,400	.2							Health Education
118,304	2.3	177,521	3.0	252,382	3.8	665,700	12.5	819,755	14.0	828,231	13.1	Maternal and Child Health
5,600	.1	46,350	.8	48,990	.7							Mental Health
330,600	6.3	524,733	8.8	569,887	8.6	371,508	7.0	514,684	8.8	610,550	9.7	Nutrition
98,669	1.9	167,507	2.8	172,754	2.6	216,514	4.0	154,636	2.7	135,330	2.1	Radiation and Isotopes
119,925	2.3	145,291	2.4	166,044	2.5	537,808	10.1	670,000	11.5	852,330	13.5	Environmental Health
												Education and Training
												Other Projects
												Foot-and-Mouth Disease Center
a/2,117,465	40.4	b/2,854,054	47.6	a/3,244,331	49.5	5,214,259	97.7	5,730,894	98.2	6,211,929	98.5	Total - Programs
208,193	4.0	208,660	3.5	216,566	3.3	10,000	.2	10,000	.2	10,000	.2	Editorial Services and Publications
2,325,658	44.4	3,062,714	51.1	3,460,897	52.8	5,224,259	97.9	5,740,894	98.4	6,221,929	98.7	TOTAL - GROUP III
												GROUP IV
												Part I-Pan American Health Organization - Organizational Meetings
156,721	3.0	149,289	2.5	161,202	2.5							Conference and Translation Section
211,530	4.0	79,561	1.3	113,803	1.7							Organizational Meetings
1,000	*	1,000	*	1,000	*							Temporary Personnel
369,251	7.0	229,850	3.8	276,005	4.2							TOTAL - GROUP IV
17,591	.3	300,000	5.0	300,000	4.6							Amount for Increasing the Working Capital Fund
5,240,000	100.0	5,990,000	100.0	6,560,000	100.0	5,335,234	100.0	5,833,173	100.0	6,305,158	100.0	TOTAL - BUDGET

\* .05 per cent or less.

a/ Includes projects of the Special Fund for Health Promotion.

## WORLD HEALTH ORGANIZATION

## ESTIMATED EXPENDITURE

## TOTAL

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

1962		1963		1964		1962		1963		1964		1962		1963		1964	
\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%
92,265	3.8	110,938	4.3	109,226	3.9							310,062	2.2	328,511	2.1	325,109	1.9
242,158	10.1	250,269	9.6	265,627	9.2							660,761	4.5	678,208	4.2	699,124	4.0
3,493	.1	3,338	.1	3,715	.1							8,773	.1	8,745	*	9,637	.1
103,390	4.3	122,095	4.7	166,925	5.8							250,000	1.7	294,600	1.8	399,550	2.3
441,006	18.3	486,640	18.7	545,493	19.0							1,229,596	8.5	1,310,064	8.1	1,433,420	8.3
423,429	17.6	414,611	16.0	417,144	14.5							1,242,600	8.6	1,259,307	7.8	1,288,086	7.4
49,723	2.1	50,056	1.9	51,751	1.8							107,256	.7	109,283	.7	111,697	.6
3,807	.1	3,662	.1	3,985	.1							11,377	.1	11,255	*	12,363	.1
92,621	3.8	50,688	2.0	55,633	2.0							1,058,232	7.4	805,463	5.0	834,767	4.8
569,580	23.6	519,017	20.0	528,513	18.4							2,419,465	16.8	2,185,308	13.5	2,246,913	12.9
76,960	3.2	83,375	3.2	87,453	3.0	140,071	9.9	141,686	8.2	142,671	8.8	3,260,848	22.6	3,474,198	21.5	3,832,496	22.1
79,477	3.3	98,606	3.8	108,140	3.7	17,924	1.3	38,290	2.2	23,772	1.5	107,184	.8	162,095	1.0	149,381	.9
48,653	2.0	58,759	2.3	48,514	1.7							108,764	.8	124,428	.8	117,808	.7
8,300	.3	13,300	.5	9,600	.3	57,143	4.0	37,754	2.2	27,157	1.7	17,936	.1	6,400	*	24,060	.1
46,972	1.9	42,144	1.6	40,284	1.4	16,042	1.1	16,823	1.0	21,097	1.3	148,126	1.0	500	*	3,700	*
437,408	18.2	687,339	26.5	810,213	28.2	605,915	42.8	818,172	47.6	855,730	52.5	93,805	.7	143,179	.9	147,490	.9
88,507	3.7	83,200	3.2	66,011	2.3	34,255	2.4	34,255	2.0	34,255	2.1	112,760	.7	112,760	.7	72,501	.4
205,460	8.5	217,636	8.4	214,625	7.5	133,698	9.5	140,794	8.1	144,819	8.9	72,159	.5	51,709	.3	75,309	.4
56,175	2.3	36,113	1.4	56,140	1.9	169,263	12.0	237,335	13.8	122,798	7.5	437,648	3.0	611,646	3.8	671,230	3.9
5,300	.2	13,900	.5	13,900	.5							197,125	1.4	283,410	1.8	176,171	1.0
3,400	.2											18,500	.1	7,800	*	7,800	*
47,186	2.0	37,630	1.5	39,629	1.4			4,600	.3	4,600	.3	56,175	.4	36,113	.2	56,140	.3
29,900	1.2											103,038	.7	120,033	.7	127,109	.7
110,511	4.6	73,235	2.8	111,051	3.9	196,467	13.9	204,325	11.9	205,669	12.6	33,271	.2	36,738	.2	13,400	.1
36,800	1.5	45,230	1.7	73,231	2.6							831,190	5.8	1,039,506	6.5	1,124,842	6.5
												35,500	.3	46,350	.3	48,990	.3
												1,009,086	7.0	1,316,977	8.2	1,497,157	8.6
												135,469	.9	212,737	1.3	245,985	1.4
												380,009	2.6	345,897	2.1	347,730	2.0
												537,808	3.7	670,000	4.2	852,330	4.9
1,281,009	53.1	1,502,076	57.9	1,690,400	58.8	1,414,348	100.0	1,720,004	100.0	1,628,924	100.0	10,027,081	69.6	11,807,028	73.2	12,775,584	73.6
20,768	.9	21,511	.8	21,910	.7							238,961	1.7	240,171	1.5	248,476	1.4
1,301,777	54.0	1,523,587	56.7	1,712,310	59.5	1,414,348	100.0	1,720,004	100.0	1,628,924	100.0	10,266,042	71.3	12,047,199	74.7	13,024,060	75.0
55,397	2.3	54,326	2.1	58,009	2.0							212,118	1.5	203,615	1.3	219,211	1.3
42,600	1.8	12,805	.5	31,128	1.1							254,130	1.8	92,366	.5	144,931	.8
												1,000	*	1,000	*	1,000	*
97,997	4.1	67,131	2.6	89,137	3.1							467,248	3.3	296,981	1.8	365,142	2.1
												17,591	.1	300,000	1.9	300,000	1.7
2,410,360	100.0	2,596,375	100.0	2,875,453	100.0	1,414,348	100.0	1,720,004	100.0	1,628,924	100.0	14,399,942	100.0	16,139,552	100.0	17,369,535	100.0

SUMMARY OF PROGRAMS BY MAJOR EXPENSE	ESTIMATA					
	TOTAL			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
PR PAN AMERICAN HEALTH ORGANIZATION - REGULAR BUDGET	2,117,465	2,854,054	3,244,331	1,212,042	1,545,720	1,674,132
PO PAN AMERICAN HEALTH ORGANIZATION - OTHER FUNDS	5,214,259	5,730,894	6,211,929	3,273,123	3,660,059	3,689,758
WR WORLD HEALTH ORGANIZATION - REGULAR BUDGET	1,281,009	1,502,076	1,690,400	765,043	929,901	982,736
TA WORLD HEALTH ORGANIZATION - TECHNICAL ASSISTANCE FUNDS	1,414,348	1,720,004	1,628,924	1,075,525	1,294,740	1,320,271
TOTAL - ALL FUNDS	10,027,081	11,807,028	12,775,584	6,325,733	7,430,420	7,666,897
<b>MALARIA</b>						
PO Argentina-8, Malaria Eradication	39,124	41,952	44,712	21,664	23,172	25,932
PO Bolivia-4, Malaria Eradication	96,929	67,692	74,943	71,119	48,392	55,643
TA Bolivia-4, Malaria Eradication	14,530	18,283	19,662	12,530	15,483	16,862
PO Brazil-24, Malaria Eradication	273,524	283,840	293,909	145,824	152,940	163,009
PO Brazil-41, Malaria Eradication (Sao Paulo)	93,416	95,727	102,195	47,114	46,587	53,055
PO British Guiana-5, Malaria Eradication	38,411	47,798	46,718	15,302	20,411	20,825
PO British Honduras-1, Malaria Eradication	58,660	32,094	19,277	24,705	23,611	14,994
PO Colombia-5, Malaria Eradication	200,934	195,213	197,133	123,939	129,673	131,593
PO Costa Rica-2, Malaria Eradication	72,690	91,598	65,078	55,890	58,098	35,778
WR Cuba-5, Malaria Eradication	76,960	83,375	87,453	54,850	61,565	65,643
PO Dominican Republic-2, Malaria Eradication	87,854	90,628	92,978	71,284	74,058	76,408
PO Ecuador-14, Malaria Eradication	126,343	114,706	125,069	88,341	80,316	90,679
TA Ecuador-14, Malaria Eradication	19,960	19,605	20,784	18,980	18,405	19,584
PO El Salvador-2, Malaria Eradication	99,945	217,790	217,013	74,696	96,890	93,113
PO Guatemala-1, Malaria Eradication	109,954	155,334	118,393	81,484	88,802	75,361
PO Haiti-4, Malaria Eradication	103,591	126,249	124,230	85,021	105,324	103,305
PO Honduras-1, Malaria Eradication	83,363	154,285	149,733	62,921	69,433	65,881
PO Jamaica-2, Malaria Eradication	61,727	12,204	11,574	44,358	10,074	10,014
PO Mexico-53, Malaria Eradication	307,717	262,790	660,566	50,077	53,050	50,826
TA Mexico-53, Malaria Eradication	71,422	72,684	70,421	65,072	66,368	64,105
PO Nicaragua-1, Malaria Eradication	83,616	199,017	196,043	64,288	84,389	81,415
PO Panama-2, Malaria Eradication	89,422	88,957	93,491	59,495	59,674	63,208
PO Paraguay-1, Malaria Eradication	101,451	114,711	107,687	77,703	87,631	80,607
PO Peru-5, Malaria Eradication	88,781	84,792	87,939	56,218	53,212	56,359
TA Peru-5, Malaria Eradication	34,159	31,114	31,804	30,639	27,850	28,540
PO Surinam-1, Malaria Eradication	89,956	87,479	92,699	64,516	71,971	77,191
PO Trinidad-3, Malaria Eradication	1,650					
PO Venezuela-7, Malaria Eradication	830					
PO Windward Islands-2, Malaria Eradication	27,995	17,606	15,856	20,069	14,786	14,017
PO AMRO-90, Malaria Technical Advisory Services (Interzone)	62,632	140,253	141,156	38,359	100,441	102,344
PO AMRO-114, Training Center for Malaria Eradication (Mexico)	13,398	13,505	9,895	2,783	2,890	
PO AMRO-117, Malaria Technical Advisory Services (Zone I)	70,630	76,322	63,154	55,838	66,298	53,130
PO AMRO-118, Malaria Technical Advisory Services (Zone III)	50,664	42,610	47,338	41,627	34,773	37,501
PO AMRO-119, Malaria Technical Advisory Services (Zone IV)	75,054	17,684	17,204	59,294	13,934	13,454
PO AMRO-121, Malaria Eradication Evaluation Teams	44,399	43,076	45,702	26,280	30,136	32,262
PO AMRO-134, Training Center for Malaria Eradication (Kingston)	72,957	76,121	81,553	56,249	57,779	64,711
PO AMRO-135, Malaria Eradication Trainees	30,000			30,000		
PO AMRO-137, Training Center for Malaria Eradication (Sao Paulo)	4,624	10,000	10,000			
PO AMRO-196, Insecticide Testing Teams	121,172	109,061	105,004	62,996	65,991	63,934
PO AMRO-197, Research on the Resistance of Anophelines to Insecticides	20,000					
PO AMRO-220, Malaria Eradication Epidemiology Teams	140,404	138,043	144,130	81,233	70,703	76,590
Total - Malaria	3,260,848	3,474,198	3,832,496	2,042,758	2,085,110	2,077,873



# T E D                      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
256,843	375,307	449,518	103,208	120,860	123,915	423,803	729,347	907,091	121,569	82,820	89,675
666,741	605,483	646,872	573,446	999,940	1,403,925	196,725	170,721	192,956	504,224	294,691	278,418
180,257	187,269	223,227	65,430	62,525	57,400	245,838	291,381	400,237	24,441	31,000	26,800
120,053	131,296	136,135	138,966	140,250	11,200	64,804	138,718	146,318	15,000	15,000	15,000
1,223,894	1,299,355	1,455,752	881,050	1,323,575	1,596,440	931,170	1,330,167	1,646,602	665,234	423,511	409,893
5,260	6,780	6,780	6,200	6,000	6,000	6,000	6,000	6,000			
16,510	14,300	14,300	5,000	5,000	5,000	4,300					
2,000	2,800	2,800									
29,400	27,600	27,600	80,000	85,000	85,000	18,300	18,300	18,300			
8,460	9,840	9,840	33,542	35,000	35,000	4,300	4,300	4,300			
3,928	4,928	4,928	19,181	20,311	20,965		2,148				
7,583	7,583	3,383	1,330	900	900				25,042		
31,195	32,640	32,640	20,000	20,000	20,000	25,800	12,900	12,900			
12,900	12,900	8,700	3,900	20,000	20,000		600	600			
7,510	7,510	7,510	10,000	10,000	10,000	4,300	4,300	4,300	300		
8,770	8,770	8,770	3,500	3,500	3,500	4,300	4,300	4,300			
20,860	20,090	20,090	12,842	10,000	10,000	4,300	4,300	4,300			
980	1,200	1,200									
15,314	16,600	19,600	5,635	100,000	100,000	4,300	4,300	4,300			
16,470	16,532	13,032	12,000	50,000	30,000						
10,770	12,925	12,925	2,500	2,500	2,500	4,300	4,500	4,500	1,000	1,000	1,000
13,552	12,852	13,852	6,890	70,000	70,000		2,000				
5,899	1,560	1,560	11,470	570							
6,020	6,020	6,020	107,900	200,000	600,000	3,000	3,000	3,000	140,720	720	720
6,350	6,316	6,316									
13,428	14,628	14,628	5,900	100,000	100,000						
13,187	12,543	13,543	8,140	8,140	8,140	8,600	8,600	8,600			
11,960	12,480	12,480	3,188	6,000	6,000	8,600	8,600	8,600			
17,920	17,280	17,280	10,343	10,000	10,000	4,300	4,300	4,300			
3,520	3,264	3,264									
21,940	12,008	12,008	3,500	3,500	3,500						
						1,650					
						830					
4,926	1,304	1,304	3,000	621	535					895	
21,773	37,312	37,312	2,000	2,000	1,000				500	500	500
									10,615	10,615	9,895
12,692	7,744	7,744	600	600	600				1,500	1,680	1,680
7,837	6,637	8,637	1,200	1,200	1,200						
15,760	3,750	3,750									
17,119	11,940	11,940	1,000	1,000	1,500						
5,708	5,492	5,492	3,000	4,500	3,000				8,000	8,350	8,350
									4,624	10,000	10,000
16,176	8,070	8,070	14,000	7,000	6,000				28,000	28,000	27,000
									20,000		
11,631	16,290	16,290	12,000	3,600	3,600				35,540	47,450	47,650
425,308	400,488	395,588	409,761	786,942	1,163,940	107,180	92,448	88,300	275,841	109,210	106,795

# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# E S T I M A

	TOTAL			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
<b>TUBERCULOSIS</b>						
WR Argentina-20, Tuberculosis Control	25,900	23,500	23,500	6,300	8,400	8,400
TA Guatemala-11, Tuberculosis Control	15,424	35,790	21,272	13,624	27,440	14,522
WR Mexico-38, Tuberculosis Control	16,471	18,152	16,343	15,356	16,727	14,918
TA Mexico-38, Tuberculosis Control	2,500	2,500	2,500			
WR AMRO-110, Tuberculosis Control	6,400	22,720	26,160	2,800	2,800	2,800
PR AMRO-246, Tuberculosis Control (Zone III)	9,783	16,599	17,469	7,783	14,599	15,469
PR AMRO-316, Tuberculosis Control (Zone IV)		8,600				
WR AMRO-316, Tuberculosis Control (Zone IV)	30,706	34,234	42,137	21,842	27,354	26,657
Total - Tuberculosis	107,184	162,095	149,381	67,705	97,320	82,766
<b>VENEREAL DISEASES AND TREPONEMATOSES</b>						
PR Dominican Republic-52, Yaws Eradication	38,876	21,961	19,446	36,276	20,711	18,196
WR Haiti-1, Yaws Eradication	29,081	39,588	29,854	26,906	27,413	27,679
WR AMRO-47, Yaws Eradication and Venereal Disease Control (Caribbean)	19,572	19,171	18,660	15,348	15,949	15,438
PR AMRO-160, Yaws Eradication and Venereal Disease Control	22,035	43,708	49,848	13,950	27,468	30,943
Total - Venereal Diseases and Treponematoses	108,764	124,428	117,808	92,480	91,541	92,256
<b>BACTERIAL DISEASES</b>						
PR Venezuela-11, Plague Investigation		6,400	4,800		2,800	2,100
PR Venezuela-39, Pneumonias			4,800			2,100
PR AMRO-74, Plague Investigation			14,460			1,400
Total - Bacterial Diseases		6,400	24,060		2,800	5,600
<b>PARASITIC DISEASES</b>						
PR Uruguay-9, Chagas' Disease	4,700					
PR AMRO-155, Schistosomiasis Control	5,436	500	3,700	1,925		1,400
PR AMRO-251, Filariasis	4,800			2,100		
PR AMRO-275, Chagas' Disease	3,000					
Total - Parasitic Diseases	17,936	500	3,700	4,025		1,400
<b>VIRUS DISEASES</b>						
TA Brazil-8, National Virus Laboratory Services	14,583	20,082	27,157	13,583	14,082	21,157
PR Brazil-38, Smallpox Eradication	2,000	4,100	2,000			
WR Brazil-42, Rabies Control	5,100	5,800	2,100	1,400	1,400	
PR Brazil-51, Yellow Fever Laboratory	6,000	6,000	6,000			
PR Colombia-52, National Institute of Health (Carlos Finlay)	25,000	25,000	25,000			
WR Costa Rica-24, Laboratory for Diagnosis of Viral Diseases	3,200	7,500	7,500	1,400	1,400	1,400
PR Ecuador-20, Smallpox Eradication	23,583	17,629	18,071	16,414	15,679	16,121
TA Ecuador-20, Smallpox Eradication	42,560	17,672		13,044	16,072	
PR AMRO-60, Smallpox Eradication	6,200	7,200	27,700	1,400	1,400	3,500
PO AMRO-181, Live Poliovirus Vaccine Studies	19,900	32,196	18,062	17,400	29,196	17,362
PR AMRO-312, Rabies Control (Zone I)			13,900			4,200
Total - Virus Diseases	148,126	143,179	147,490	64,641	79,229	63,740

# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
8,100	10,800	10,800				11,500	4,300	4,300			
1,800	3,600	2,000		450	450		4,300	4,300			
1,115	1,425	1,425				2,500	2,500	2,500			
3,600	3,600	3,600					16,320	19,760			
2,000	2,000	2,000					8,600				
4,564	6,880	6,880				4,300		8,600			
21,179	28,305	26,705		450	450	18,300	36,020	39,460			
1,800	1,250	1,250									
2,175	2,175	2,175		10,000							
4,224	3,222	3,222									
6,900	10,640	13,300	1,185	2,000	2,000		3,600	3,605			
15,099	17,287	19,947	1,185	12,000	2,000		3,600	3,605			
	3,600	2,700									
		2,700									
		1,800			1,700			9,560			
	3,600	7,200			1,700			9,560			
3,511						4,700					
2,700		1,800							3,000	500	500
6,211		1,800				4,700			3,000	500	500
1,800	1,800		500	2,000	2,000	1,000	6,000	6,000			
				500	500	2,000	2,100	2,100	6,000	6,000	6,000
						1,400	2,100	1,600	25,000	25,000	25,000
1,800	1,800	1,800									
2,805	1,950	1,950	4,364				4,300	4,300			
4,680	1,600		24,836								
1,800	1,800	4,500		3,000	3,500			15,200	3,000	1,000	1,000
1,500	2,000	700	1,000	1,000				4,300			
		5,400									
14,385	10,950	14,350	30,700	6,500	6,000	4,400	14,500	31,400	34,000	32,000	32,000

## ESTIMA

SUMMARY OF PROGRAMS  
BY MAJOR EXPENSE

## LEPROSY

	TOTAL			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
WR Argentina-28, Leprosy Control		2,500	4,500			
PR Brazil-48, Leprosy Control	9,900	6,400	2,000	2,800	2,800	
TA Colombia-19, Leprosy Control	16,042	16,823	21,097	13,492	13,763	14,037
WR Mexico-29, Leprosy Control	16,511	14,486	17,094	15,396	13,371	15,979
PR Venezuela-36, Leprosy	3,200			1,400		
PR AMRO-149, Leprosy Control		25,473	5,920		1,400	1,400
WR AMRO-149, Leprosy Control	13,600			4,200		
PR AMRO-202, Leprosy Control (Zone III)	16,191	18,720		13,639	16,218	
PR AMRO-263, Leprosy Control (Zone IV)	1,500	3,200	3,200		1,400	1,400
WR AMRO-305, Leprosy Control (Zone VI)	16,861	25,158	18,690	14,973	16,508	16,040
Total - Leprosy	93,805	112,760	72,501	65,900	65,460	48,856

## PUBLIC HEALTH ADMINISTRATION

WR Argentina-4, National Institute of Microbiology	8,700	32,300	34,300	2,100	10,500	10,500
TA Argentina-7, Health Services (El Chaco, Rio Negro, Misiones)	52,017	60,739	64,531	49,073	54,655	58,447
PR Argentina-13, PAHO Fellowships for Health Services	4,300	8,600	12,900			
WR Argentina-17, School of Public Health	9,781	29,006	32,419	5,481	15,906	18,919
PR Argentina-24, Planning and Organization of Hospital Services		3,300	7,600			
PR Argentina 35, Public Health Services (San Juan)	50,296	53,892	53,049	45,289	49,212	43,369
TA Bahamas-3, Health Services		17,083	19,457		11,943	14,317
PR Bolivia-10, National Health Services	48,381	49,935	49,056	41,026	41,207	40,328
TA Bolivia-10, National Health Services		18,721	18,106		12,121	11,506
TA Bolivia-11, Joint Field Mission on Indigenous Populations	19,251	16,149	31,490	13,931	14,199	25,240
WR Brazil-3, Health Services in Nine Northeast States	26,555	38,600	60,069	24,635	28,080	39,749
TA Brazil-3, Health Services in Nine Northeast States		4,300	4,300			
PR Brazil-18, National Food and Drug Services	9,100	9,100	4,300	2,100	2,100	
WR Brazil-19, School of Public Health in Rio de Janeiro	4,300	11,500	11,500		1,400	1,400
PR Brazil-28, PAHO Fellowships for Health Services	13,300	12,900	17,200			
WR Brazil-35, School of Public Health in Sao Paulo	20,441	32,800	37,800	1,400	1,400	1,400
PR Brazil-39, Health Services (Mato Grosso)	36,973	43,395	47,968	31,133	36,935	41,508
PR Brazil-44, Teaching of Public Health in Schools of Veterinary Medicine	4,300	2,600	2,500			
PR Brazil-65, Planning		3,200	9,500		1,400	1,400
WR British Guiana-10, National Health Services	25,099	27,198	30,174	19,641	25,358	28,334
WR British Honduras-5, Health Services	9,601	26,167	32,204	8,601	24,167	25,904
PR British Honduras-6, PAHO Fellowships for Health Services	4,300	4,300	4,300			
WR Canada-2, Consultants in Specialized Fields of Public Health	3,200	3,200	3,200	1,400	1,400	1,400
WR Canada-200, WHO Fellowships for Health Services	5,630	10,000	10,000			
PR Chile-26, PAHO Fellowships for Health Services	4,300	4,300	8,600			
PR Chile-27, Health Services (Ovalle-Copiapo)	6,400			2,800		
WR Chile-31, School of Public Health	12,400	8,500	14,900	2,800		2,800
PR Chile-43, Administrative Methods and Practices in Public Health	20,265			16,935		
TA Chile-49, Health Services		9,600	9,600		4,800	4,800
TA Chile-52, Community Development (Chiloé Island)	13,635			12,435		
TA Colombia-4, National Health Services	113,273	125,411	125,924	104,258	112,691	113,204
PR Colombia-21, PAHO Fellowships for Health Services	4,300	8,600	12,900			
PR Colombia-24, School of Public Health		8,600				
WR Colombia-24, School of Public Health	32,727	23,943	34,933	27,542	23,943	26,333
WR Colombia-200, WHO Fellowships for Health Services	4,300					
PR Costa Rica-14, National Health Services	12,069	17,743	22,863	7,769	12,943	13,763
TA Costa Rica-201, WHO/TA Fellowships for Health Services	5,315	4,300	4,300			
PR Cuba-3, Public Health Services	10,047			9,571		
TA Cuba-3, Public Health Services	37,130	61,502	63,977	35,155	53,727	56,202
PR Cuba-6, PAHO Fellowships for Health Services	8,600					
WR Cuba-200, WHO Fellowships for Health Services		8,600	8,600			
PR Dominican Republic-4, Public Health Services	59,933	51,928	50,797	56,683	49,328	48,197
WR Dominican Republic-4, Public Health Services		24,200	33,890		22,600	31,490
PR Dominican Republic-11, PAHO Fellowships for Health Services	4,300	8,600	12,900			

# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
3,600	3,600					3,500	2,500	4,500			
2,550	3,060	3,060						2,000			
1,015	1,015	1,015	100	100	100			4,000			
1,800											
	1,800	1,800		2,000	1,000		20,273	1,720			
9,400			50								
2,502	2,502										
1,500	1,800	1,800									
1,888	2,650	2,650					6,000				
24,255	16,427	10,325	150	2,100	1,100	3,500	28,773	12,220			
2,300	13,500	13,500				4,300	8,300	10,300			
2,944	1,784	1,784					4,300	4,300			
	2,700	5,400		1,800	1,800	4,300	8,600	12,900			
						4,300	8,600	6,300			
707	1,380	1,380				4,300	3,300	8,300			
	840	840					4,300	4,300			
3,055	4,428	4,428				4,300	4,300	4,300			
	2,300	2,300					4,300	4,300			
1,820	1,950	1,950	3,500					4,300			
1,920	1,920	3,120									
							8,600	17,200			
2,700	2,700					4,300	4,300	4,300			
	1,800	1,800		4,000	4,000	4,300	4,300	4,300			
						13,300	12,900	17,200			
1,800	1,800	1,800	10,000	15,000	15,000	4,300	8,600	8,600	2,941	6,000	11,000
1,540	2,160	2,160				4,300	4,300	4,300			
				500	500	4,300	2,100	2,000			
1,158	1,800	1,800				4,300		6,300			
	1,840	1,840									
1,000	2,000	2,000				4,300	4,300	4,300			
								4,300			
1,800	1,800	1,800									
							5,630	10,000			
							4,300	8,600			
3,600											
3,600		3,600	1,000	1,000	1,000	5,000	7,500	7,500			
3,330											
1,200	4,800	4,800									
9,015	8,420	8,420					4,300	4,300			
							4,300	8,600			
								8,600			
885							4,300	8,600			
							4,300				
	500	500					4,300	4,300			
							5,315	4,300			
476											
1,975	3,475	3,475						4,300			
							8,600				
3,200	2,400	2,400	50	200	200			8,600			
	1,600	2,400									
							4,300	8,600			
								12,900			

## ESTIMA

SUMMARY OF PROGRAMS  
BY MAJOR EXPENSE

	TOTAL			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
PUBLIC HEALTH ADMINISTRATION (continued)						
TA Dominican Republic-16, Veterinary Medical Education		16,910	18,439		15,660	17,089
WR Ecuador-4, National Health Services	12,874	31,180	43,654	11,524	24,330	36,554
TA Ecuador-4, National Health Services	17,030	24,387	27,775	13,670	16,727	20,115
PR Ecuador-11, National Institute of Health	12,961	13,400	13,400	8,451	2,100	2,100
PR Ecuador-19, PAHO Fellowships for Health Services	4,300	4,300	4,300			
TA Ecuador-23, Health Planning	12,800			11,600		
PR El Salvador-9, PAHO Fellowships for Health Services	4,300	4,300	8,600			
WR El Salvador-15, Public Health Laboratory	9,950	18,932	19,869	9,950	14,632	15,569
PR El Salvador-19, National Health Services		13,831	16,060		12,831	15,060
TA El Salvador-19, National Health Services		36,458	35,855		29,658	29,055
PR French Antilles and Guiana-3, PAHO Fellowships for Health Services	4,300	4,300	4,300			
WR Guatemala-8, National Health Services	70,020	70,937	71,866	62,570	65,437	63,416
PR Guatemala-12, PAHO Fellowships for Health Services	4,300	8,600	8,600			
PR Guatemala-14, Public Health in Schools of Veterinary Medicine	7,160	7,500	7,500	1,400	1,400	1,400
WR Guatemala-19, Public Health Legislation	3,200			1,400		
PR Haiti-9, Public Health Laboratory	14,986	16,741	19,490	13,536	13,791	16,540
PR Haiti-12, PAHO Fellowships for Health Services	4,300	4,300	4,300			
PR Haiti-16, National Health Services	11,658			11,021		
WR Haiti-16, National Health Services		12,100	16,945		11,300	15,745
TA Haiti-16, National Health Services	61,226	64,111	67,276	56,951	55,721	58,886
PR Honduras-4, National Health Services	15,260			13,995		
TA Honduras-4, National Health Services	48,023	67,582	64,739	46,398	60,882	58,039
PR Honduras-6, PAHO Fellowships for Health Services	4,300	8,600	8,600			
WR Honduras-12, Public Health Legislation	3,200			1,400		
WR Jamaica-11, Public Health Training Station	3,200	6,400		1,400	2,800	
PR Mexico-15, State Health Services	17,806	17,960	18,475	11,806	11,960	12,475
WR Mexico-15, State Health Services	63,302	71,132	78,696	58,817	66,447	73,811
PR Mexico-25, PAHO Fellowships for Health Services	4,300	8,600	8,600			
PR Mexico-28, Public Health Laboratory	7,875	14,900	10,625	2,450	2,100	2,100
WR Mexico-30, School of Public Health	7,500	9,000	7,500	1,400	1,400	1,400
WR Mexico-34, Teaching of Public Health in Schools of Veterinary Medicine	7,500	10,700	6,400	1,400	2,800	2,800
TA Netherlands Antilles-6, WHO/TA Fellowships for Health Services		4,500	4,500			
TA Netherlands Antilles-7, WHO/TA Fellowships for Nursing Services		3,275	3,275			
PR Nicaragua-7, PAHO Fellowships for Health Services	4,300	8,600	8,600			
PR Panama-1, National Health Services	10,276			9,476		
TA Panama-1, National Health Services	45,560	59,791	56,957	42,260	51,991	49,157
PR Panama-8, PAHO Fellowships for Health Services	4,300	4,300	8,600			
PR Panama-10, Planning and Organization of Hospital Services		14,571	15,416		13,771	14,616
PR Paraguay-10, Health Services	19,367			16,298		
TA Paraguay-10, Health Services	71,245	99,481	104,937	67,720	90,991	96,447
PR Paraguay-13, PAHO Fellowships for Health Services	4,300	8,600	8,600			
TA Peru-22, National Health Services	43,160	61,455	63,857	39,640	53,635	56,037
TA Peru-23, Joint Field Mission on Indigenous Populations	1,500	1,500	1,500			
PR Peru-25, PAHO Fellowships for Health Services	4,300	4,300	8,600			
PR Surinam and Netherlands Antilles-2, PAHO Fellowships for Health Services	4,300	4,300	4,300			
WR United States-10, Consultants in Specialized Fields of Public Health	12,800	14,400	14,400	5,600	6,300	6,300
PR United States-11, PAHO Fellowships for Health Services	19,000	25,000	25,000			
PR United States-12, Medical and Public Health Training	11,000	5,000	5,000			
WR United States-200, WHO Fellowships for Health Services	9,740	10,238	10,000			
TA Uruguay-5, National Health Services	61,250	60,917	64,935	41,006	54,377	58,605
PR Uruguay-10, PAHO Fellowships for Health Services	5,500	6,300	8,600			
PR Uruguay-13, Training of Health Personnel	14,064	16,967	18,330	7,189	11,242	12,605
PR Venezuela-9, PAHO Fellowships for Health Services	4,300	8,600	8,600			
PR Venezuela-18, National Institute of Hygiene	7,500	7,500	7,500	1,400	1,400	1,400
WR Venezuela-19, School of Public Health	15,567	18,760	22,297	12,476	16,680	17,617
WR Venezuela-24, Consultant Services in Health	3,200	9,600	19,200	1,400	4,200	8,400

## TED EXPENDITURE

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	1,250	1,350									
1,350	2,550	2,800					4,300	4,300			
3,360	3,360	3,360					4,300	4,300			
210	2,700	2,700				4,300	8,600	8,600			
						4,300	4,300	4,300			
1,200											
						4,300	4,300	8,600			
	1,000	1,000					4,300	4,300			
	1,500	1,500		1,000	1,000		4,300	4,300			
						4,300	4,300	4,300			
2,150	2,150	2,150	1,000	3,350	2,000	4,300	4,300	4,300			
						4,300	8,600	8,600			
1,460	1,800	1,800				4,300	4,300	4,300			
1,800											
450	450	450	1,000	2,500	2,500	4,300	4,300	4,300			
637											
	800	1,200									
4,275	3,890	3,890		200	200		4,300	4,300			
1,265											
1,625	2,400	2,400				4,300	4,300	4,300			
1,800						4,300	8,600	8,600			
1,800	3,600										
1,600	1,600	1,600	100	100	100	4,300	4,300	4,300			
4,385	4,385	4,385	100	300	500						
3,150	2,700	2,700	750	1,500	1,525	4,300	8,600	8,600			
1,800	1,800	1,800		1,500		1,525	8,600	4,300			
1,800	3,600	3,600				4,300	4,300	4,300			
							4,500	4,500			
						4,300	3,275	3,275			
800						4,300	8,600	8,600			
3,300	3,300	3,300		200	200		4,300	4,300			
						4,300	4,300	8,600			
	800	800									
315						2,754	6,000	6,000			
3,525	2,490	2,490				4,300	8,600	8,600			
3,520	3,520	3,520					4,300	4,300			
1,500	1,500	1,500				4,300	4,300	8,600			
						4,300	4,300	4,300			
7,200	8,100	8,100				19,000	25,000	25,000	11,000	5,000	5,000
						9,740	10,238	10,000			
2,310	2,240	2,030				17,934	4,300	4,300			
						5,500	6,300	8,600			
375	425	425	1,000	1,000	1,000	5,500	4,300	4,300			
1,800	1,800	1,800				4,300	8,600	8,600			
1,391	380	380				4,300	4,300	4,300			
1,800	5,400	10,800				1,700	1,700	4,300			

# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# E S T I M A

	E S T I M A					
	T O T A L			P E R S O N N E L C O S T S		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
PUBLIC HEALTH ADMINISTRATION (continued)						
WR Venezuela-29, Planning and Organization of Hospital Services	4,300	21,930	22,867		16,680	17,617
PR West Indies-4, PAHO Fellowships for Health Services	4,300	4,300	4,300			
TA West Indies-6, Public Health Legislation	3,500			1,750		
PR AMRO-16, Schools of Public Health		4,000	4,000			
WR AMRO-16, Schools of Public Health	4,200	9,811	15,881	1,400	1,400	2,800
PR AMRO-45, Laboratory Services		33,368			13,703	
WR AMRO-45, Laboratory Services		11,740	42,511			16,951
WR AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine	3,200	26,521	12,800	1,400	1,400	1,400
WR AMRO-76, Vaccine Production and Testing	5,250	15,400	13,800		2,800	2,100
PR AMRO-148, Laboratory for Production of Biologicals (Zone III)	17,300	21,758	25,432	4,200	13,858	15,132
PR AMRO-150, Food and Drug Services	40,664	16,000	19,700	23,414	4,200	5,600
PR AMRO-152, Seminar on Schools of Public Health		25,545			2,100	
PR AMRO-162, Epidemiology (Zone II)	17,536		21,016	14,436		17,916
PR AMRO-163, Epidemiology (Zone VI)	24,429	22,496	25,496	21,369	18,846	21,846
PR AMRO-178, Veterinary Public Health (Zone II)	21,302	19,746	21,406	18,202	16,646	18,306
PR AMRO-179, Veterinary Public Health (Zone IV)	19,535	17,885	19,397	17,035	15,885	17,397
PR AMRO-185, Medical Care and Hospital Organization	13,900	65,800	65,900	4,200	16,800	16,800
WR AMRO-188, Veterinary Public Health (Zone III)	19,201	21,599	30,481	15,701	18,099	16,281
WR AMRO-189, Veterinary Public Health (Zone V)	16,470	20,945	17,057	14,525	19,000	15,112
PR AMRO-198, Administrative Methods and Practices in Public Health	24,184	25,959	27,627	15,215	20,465	22,133
PR AMRO-203, Epidemiology (Zone III)	22,561	20,974	26,440	19,861	17,874	23,340
PR AMRO-235, Food Sanitation		4,200	4,000		1,400	1,400
PR AMRO-253, Administrative Methods and Practices in Public Health (Zone III)		14,691	18,132		12,858	15,132
PR AMRO-281, Planning	45,668	28,394	97,220	7,000	8,400	25,200
PO AMRO-281, Planning	39,200			2,400		
PR AMRO-303, Medical Care (Zone III)	21,494	17,841	18,133	15,040	15,841	16,133
PR AMRO-304, Medical Care (Zone VI)	22,174	17,609	17,543	16,074	15,649	15,583
PO AMRO-304, Medical Care (Zone VI)	10,002			6,623		
PR AMRO-307, Field Office - El Paso	98,072	98,602	100,332	77,752	74,077	79,497
PO AMRO-310, Study on Production of Biologicals	6,500			3,000		
PR AMRO-314, Planning (Zone II)	898	6,400	12,700	393	2,800	2,800
PR AMRO-317, Medical Care (Zone IV)		14,804	15,977		11,804	12,977
PR AMRO-318, Planning (Zone IV)		3,200	12,700		1,400	2,800
PR AMRO-319, Administrative Methods and Practices in Public Health (Zone VI)		6,400	6,400		2,800	2,800
PR AMRO-322, Planning (Zone VI)		18,016	26,338		12,896	16,438
PR AMRO-324, Planning (Zone I)			12,700			2,800
PR AMRO-325, Planning (Zone III)			12,700			2,800
<b>Total - Public Health Administration</b>	<b>2,024,519</b>	<b>2,545,862</b>	<b>2,857,961</b>	<b>1,408,352</b>	<b>1,688,259</b>	<b>1,850,939</b>
VITAL AND HEALTH STATISTICS						
PR Argentina-32, Health Statistics		7,500	7,500		1,400	1,400
TA AMRO-10, Program for Biostatistics Education	34,255	34,255	34,255			
WR AMRO-85, Latin American Center for Classification of Diseases	32,215	30,825	15,825	4,200	4,200	4,200
WR AMRO-86, Health Statistics (Zone III)	21,813	15,602	16,501	18,813	12,602	13,501
WR AMRO-143, Health Statistics (Zone IV)	16,865	18,505	17,141	13,595	15,505	14,141
WR AMRO-144, Health Statistics (Zone II)	17,614	18,268	16,544	13,789	15,168	13,444
PR AMRO-156, Training Program in Hospital Statistics	15,161	28,753	34,020	9,945	13,143	12,410
PR AMRO-157, Health Statistics (Zone I)	14,442	16,843	18,268	11,832	13,921	15,346
PR AMRO-159, Health Statistics (Zone VI)	15,951	21,197	17,098	13,086	18,337	14,238
PR AMRO-201, Health Statistics (Zone V)	15,136	17,338	18,727	10,716	12,678	14,067



# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	950	950				4,300	4,300	4,300			
1,750						4,300	4,300	4,300			
1,800	1,800	3,600	1,000	4,000	6,000		2,611	3,481		4,000	4,000
	12,365			3,000			4,300				
		14,960			2,000		11,740	8,600			
1,800	1,800	1,800		500	1,000		21,821	8,600	5,250	1,000	9,000
	3,600	2,700								9,000	
5,400	1,600	2,000	3,400	2,000	4,000	4,300	4,300	4,300			
12,250	5,400	7,200			500		6,400	6,400	5,000		
	2,700			750			19,745			250	
3,000		3,000	100		100						
3,060	3,650	3,650									
3,000	3,000	3,000	100	100	100						
2,500	2,000	2,000									
5,400	21,600	21,600		6,000	6,000	4,300	21,400	21,500			
3,000	3,000	3,000	500	500	600			10,600			
1,945	1,945	1,945									
1,750	3,544	3,544		1,950	1,950				7,219		
2,700	3,000	3,000		100	100						
	1,800	1,800		1,000	800						
	1,833	3,000									
7,068	10,800	32,400	10,000				9,194	39,620	21,600		
33,800									2,500		
2,154	2,000	2,000				500					
1,600	1,600	1,600	1,500	360	360	4,300					
3,379						3,000					
10,470	11,990	11,900		5,300	1,700				9,850	7,235	7,235
3,500											
505	3,600	3,600									
	3,000	3,000							6,300		
	1,800	3,600							6,300		
	3,600	3,600									
	1,620	1,900					3,500	8,000			
		3,600						6,300			
		3,600						6,300			
225,809	254,984	300,876	35,100	59,710	56,735	289,898	510,424	613,176	65,360	32,485	36,235
	1,800	1,800									
							19,255	4,300	15,000	15,000	15,000
5,400	5,400	5,400					19,255	19,255	15,000	15,000	15,000
3,000	3,000	3,000							15,000	15,000	
3,270	3,000	3,000					7,615	6,225	6,225		
3,725	3,000	3,000	100	100	100						
4,216	3,280	3,280	1,000	1,000	1,000						
2,610	2,922	2,922						11,330	17,330		
2,565	2,560	2,560	300	300	300						
420	360	360									
						4,000	4,300	4,300			

# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# ESTIMA

	ESTIMA					
	TOTAL			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
<b>VITAL AND HEALTH STATISTICS (continued)</b>						
PR AMRO-241, Advisory Committee on Statistics	4,569		9,307			
PR AMRO-247, Teaching of Statistics in Medical Schools	4,800	5,520	5,520	2,100		
PR AMRO-261, Advisory Committee on International Classification of Diseases		12,726	12,726			
PO AMRO-266, Regional Development of Epidemiological Studies	226,100	231,358	102,562	175,999	179,911	78,052
Total - Vital and Health Statistics	418,921	458,690	325,994	274,075	286,865	180,799
<b>DENTAL HEALTH</b>						
PR Brazil-37, Dental Health Education	2,000	2,100	6,000			
PR Brazil-43, Teaching of Preventive Dentistry	1,000	3,100	1,500			
PR AMRO-72, Dental Health	25,573	23,000	24,880	2,092	1,400	1,400
PO AMRO-72, Dental Health	12,005					
PR AMRO-257, Seminar on Dental Education	11,566	3,000	18,920			
PO AMRO-257, Seminar on Dental Education	16,015	8,900	12,400	10,055	6,400	7,800
PR AMRO-274, Salt Fluoridation	4,000					
WR AMRO-284, Dental Education		11,609	11,609		1,400	1,400
Total - Dental Health	72,159	51,709	75,309	12,147	9,200	10,600
<b>NURSING</b>						
PR Argentina-3, Nursing Education		4,300	8,600			
TA Argentina-3, Nursing Education	48,823	60,080	68,307	46,048	57,450	65,677
PR Argentina-25, Training of Nursing Personnel	14,228	16,573	20,334	11,788	10,833	12,594
WR Bolivia-5, Nursing Education	19,791	18,253	19,302	12,991	11,578	12,627
PR Brazil-60, Nursing Education (Recife)		22,201	29,753		13,001	15,153
PR Brazil-63, Training of Nursing Auxiliaries			25,255			14,755
WR Chile-41, National Planning for Nursing	15,196	24,187	21,159	13,696	16,787	13,759
PR Costa Rica-18, Advanced Nursing Education	8,264	21,008	17,291	7,039	11,158	11,941
WR Cuba-4, Nursing Education	16,160			12,845		
TA Cuba-4, Nursing Education	23,870	13,133	14,474	21,870	12,133	13,474
WR Dominican Republic-3, Nursing Education	12,267	29,200	36,708	11,267	22,400	25,434
WR Ecuador-16, Nursing Education	17,815	19,490	20,458	11,151	10,526	11,494
TA El Salvador-11, National Public Health Nursing Services	12,235			11,835		
PR Guatemala-6, Nursing Education	5,800					
TA Guatemala-6, Nursing Education	24,868	38,047	31,339	23,628	24,457	24,149
PR Mexico-14, Nursing Education	17,193	16,626	30,880	11,793	11,126	24,080
WR Nicaragua-5, Nursing Education	32,070	33,572	18,850	22,955	26,732	12,779
WR Peru-15, Nursing Education	18,064	16,807	15,318	11,284	12,027	10,538
TA Venezuela-14, Nursing Education	10,271	15,276	16,592	9,828	14,706	16,022
PR Venezuela-14, Nursing Education	4,300	8,600	11,800			1,400
WR West Indies-3, Nursing Services	12,107	13,781	14,632	10,607	11,189	12,040
TA West Indies-3, Nursing Services	13,631	14,258	14,107	12,059	11,435	11,284
PR West Indies-12, Nursing Education	6,119	25,506	28,845	5,419	20,206	23,545
WR AMRO-28, Advanced Nursing Education	18,000	30,100	43,000			
WR AMRO-46, Seminar on Nursing Education	17,200	20,831	13,288	4,400	1,400	1,400
WR AMRO-63, Schools of Nursing	1,500	11,415	11,910		2,800	2,800
PR AMRO-240, Seminar on Public Health Nursing Services		12,346	15,800		1,400	1,400
WR AMRO-240, Seminar on Public Health Nursing Services	25,290			1,400		
PR AMRO-245, Training Course on Nursing Supervision and Administration (Zone I)	42,586			6,606		
PR AMRO-289, Nursing (Zone I)		26,453	26,302		23,453	23,302
PR AMRO-290, Nursing (Zone II)		21,011	20,801		18,111	17,901
PR AMRO-291, Nursing (Zone III)		21,552	20,668		19,072	18,118
PR AMRO-292, Nursing (Zone IV)		19,025	18,201		16,825	16,001
PR AMRO-293, Nursing (Zone V)		18,226	17,191		15,976	14,941
PR AMRO-294, Nursing (Zone VI)		19,789	20,065		17,249	17,525
Total - Nursing	437,648	611,646	671,230	280,509	414,030	446,133

# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
4,569		9,307									
2,700	5,520	5,520									
3,000	12,726	12,726	9,400	8,700	3,300				37,701	39,747	18,210
	3,000	3,000									
35,475	46,568	55,875	10,800	10,100	4,700	30,870	45,410	51,410	67,701	69,747	33,210
1,850	1,800	1,800	1,000	1,000		2,000	2,100	6,000			
			20,631	18,800	20,680	1,000	2,100	1,500			
			12,005				1,000	1,000			
			500	3,000	2,000						
4,960	1,800	3,600	1,000	700	1,000	10,566		16,920	500		
	1,800	1,800	4,000								
				1,000	1,000		7,409	7,409			
6,810	5,400	7,200	39,136	24,500	24,680	13,566	12,609	32,829	500		
2,775	2,630	2,630					4,300	8,600			
1,440	1,440	1,440	1,000	1,000	1,000		3,300	5,300			
500	375	375	2,000	2,000	2,000	4,300	4,300	4,300			
	600	6,000					8,600	8,600			
1,000	2,600	2,600	500	500	500			10,000			
500	500	500	725	550	550		4,300	4,300			
815			500			2,000	8,800	4,300			
2,000	1,000	1,000						4,300			
1,000	2,000	2,174		500	500		4,300	8,600			
364	364	364	2,000			4,300	8,600	8,600			
400											
1,240	1,240	1,240	1,500			4,300					
				8,050	1,650		4,300	4,300			
1,000	1,000	2,000	100	200	500	4,300	4,300	4,300			
1,465	1,465	771	3,350	1,075	1,000	4,300	4,300	4,300			
480	480	480	2,000			4,300	4,300	4,300			
443	570	570									
		1,800				4,300	8,600	8,600			
1,500	2,592	2,592									
1,572	2,823	2,823									
700	1,000	1,000					4,300	4,300			
						18,000	30,100	43,000			
1,800	1,800	1,800	750	1,000	1,000	10,000	16,631	9,088	250		
	3,600	3,600	1,500	2,400	2,400						
	1,800	1,800		1,000	1,000			2,615			
6,560			15,830			1,000		7,646			
8,480			1,000			26,500					
	3,000	3,000									
	2,800	2,800		100	100						
	2,480	2,550									
	2,200	2,200									
	2,250	2,250									
	2,540	2,540									
36,034	45,149	52,899	32,755	18,375	12,700	87,600	133,592	158,998	750	500	500

# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# E S T I M A

	T O T A L			P E R S O N N E L C O S T S		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
<b>SOCIAL AND OCCUPATIONAL HEALTH</b>						
TA Chile-21, Rehabilitation Center	29,000	34,489	31,252	25,140	32,629	29,392
TA Chile-22, Institute of Occupational Health	140,263	202,846	91,546	23,700	39,566	42,366
PR Chile-22, Institute of Occupational Health		2,500	6,800			
PR Venezuela-20, Public Health Aspects of Accident Prevention	1,750					
PR Venezuela-28, Industrial Hygiene	4,300	4,300	4,300			
PR Venezuela-37, Rehabilitation		3,200	1,750		1,400	
PR AMRO-3, Rehabilitation	15,934	15,735	16,965	13,434	12,735	13,965
PR AMRO-256, Industrial Hygiene	5,878	20,340	23,558	1,500	4,454	4,558
Total - Social and Occupational Health	197,125	283,410	176,171	63,774	90,784	90,281
<b>CHRONIC AND DEGENERATIVE DISEASES</b>						
PR Chile-44, Cancer	10,700			2,800		
PR Uruguay-16, Chronic Diseases	7,800	7,800	7,800	2,100	2,100	2,100
Total - Chronic and Degenerative Diseases	18,500	7,800	7,800	4,900	2,100	2,100
<b>HEALTH EDUCATION</b>						
WR AMRO-93, Health Education (Zone II)	22,974	21,206	22,783	19,974	18,006	19,583
WR AMRO-112, Community Development Training Center	16,601	14,907	16,205	15,351	13,557	14,855
WR AMRO-306, Conference on Postgraduate Training in Health Education	16,600		17,152	1,400		1,400
Total - Health Education	56,175	36,113	56,140	36,725	31,563	35,838
<b>MATERNAL AND CHILD HEALTH</b>						
WR Argentina-33, Maternal and Child Health	4,300	13,900	13,900		4,200	4,200
PR Brazil-64, Pediatric Education (Recife)			10,800			2,100
PO Peru-32, Infantile Diarrhea and Malnutrition	49,190	50,228	50,092	39,319	40,866	40,604
PR AMRO-94, Diarrheal Diseases in Childhood	31,718	30,827	27,994	25,218	29,327	26,494
PR AMRO-183, Nursing Midwifery	16,830	25,078	24,323	11,620	12,803	12,088
WR AMRO-268, Pediatric Education Course	1,000					
Total - Maternal and Child Health	103,038	120,033	127,109	76,157	87,196	85,486
<b>MENTAL HEALTH</b>						
PR Argentina-27, Mental Health	10,452	9,100	13,400	2,100	2,100	2,100
WR Venezuela-2, Mental Health	3,400			1,600		
PR AMRO-93, Seminar on Alcoholism	2,000					
PR AMRO-273, Seminar on Mental Health	17,419	27,638		2,100	2,100	
Total - Mental Health	33,271	36,738	13,400	5,800	4,200	2,100
<b>NUTRITION</b>						
PO Bolivia-17, Nutrition	6,983			890		
PR Brazil-7, Nutrition (Rio Grande do Norte)	8,600	8,600	8,600			
PR Brazil-61, Nutrition Course for Physicians (Recife)		5,000	10,500			
PR Brazil-62, Nutrition Course for Public Health Professional Personnel (Sao Paulo)			4,000			
WR Chile-35, Nutrition			4,300			



# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# E S T I M A

	E S T I M A					
	T O T A L			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
<b>NUTRITION (continued)</b>						
PO Ecuador-53, National Institute of Nutrition	29,950	22,135				
PR Haiti-20, Nutrition	15,719	17,052	18,813	14,719	15,952	13,413
TA Mexico-23, Nutrition		4,600	4,600			
PR AMRO-54, Institute of Nutrition of Central America and Panama	63,463	94,494	98,553	47,053	66,674	70,733
PO AMRO-54, Institute of Nutrition of Central America and Panama	628,767	797,620	828,231	459,000	582,263	604,609
PR AMRO-87, Endemic Goiter Prevention			18,326			1,400
PR AMRO-165, Nutrition Advisory Services (Interzone)	30,522	37,477	75,854	25,900	25,106	29,925
WR AMRO-165, Nutrition Advisory Services (Interzone)	15,812			11,516		
WR AMRO-262, Nutrition Advisory Services (Zone IV)	17,662	19,759	18,222	14,476	16,759	15,036
WR AMRO-269, Nutrition Advisory Services (Zone I)	13,712	17,871	17,107	11,756	15,648	14,884
PR AMRO-321, Nutrition Advisory Services (Zone VI)		14,898	17,736		12,398	15,236
Total - Nutrition	831,190	1,039,506	1,124,842	585,310	734,800	765,236
<b>RADIATION AND ISOTOPIES</b>						
PR Chile-39, Training in the Medical Use of Radioisotopes	1,300	1,000	1,000			
PR Venezuela-15, Health Aspects of Radiation	4,300	4,300	3,200			1,400
PR AMRO-142, Health Aspects of Radiation		41,050	44,790		4,900	4,900
WR AMRO-142, Health Aspects of Radiation	29,900			4,900		
Total - Radiation and Isotopes	35,500	46,350	48,990	4,900	4,900	6,300
<b>ENVIRONMENTAL HEALTH</b>						
PO Argentina-29, Promotion of Community Water Supplies	9,600	9,600	9,600	4,200	4,200	4,200
PR Argentina-30, Sanitary Engineering Education	7,500	8,700	7,500	1,400	1,400	1,400
PR Argentina-51, <u>Aedes aegypti</u> Eradication	35,428	11,560		30,948	9,160	
TA Bahamas-1, <u>Aedes aegypti</u> Eradication	7,366	12,600	13,271	6,606	10,700	12,071
PO Bolivia-15, Promotion of Community Water Supplies	16,487	17,364	18,755	11,327	14,004	15,395
PO Brazil-49, Promotion of Community Water Supplies	14,400	14,400	14,400	6,300	6,300	6,300
PO British Honduras-7, Promotion of Community Water Supplies		17,643	19,476		13,393	15,226
TA British Virgin Islands-1, <u>Aedes aegypti</u> Eradication	12,893	12,968	14,294	12,263	11,528	12,854
PO Chile-40, Promotion of Community Water Supplies	14,400	14,400	14,400	6,300	6,300	6,300
PO Colombia-25, Promotion of Community Water Supplies	22,110	32,383	34,235	15,160	26,323	28,175
PO Costa Rica-22, Promotion of Community Water Supplies	12,090	16,843	18,676	4,900	13,043	14,876
PR Cuba-1, <u>Aedes aegypti</u> Eradication	68,757	70,312	73,875	41,357	43,712	47,275
TA Cuba-14, Refuse Disposal	4,800					
PR Dominican Republic-8, <u>Aedes aegypti</u> Eradication	27,939	28,855	29,217	24,144	25,060	25,422
TA Dominican Republic-15, Promotion of Community Water Supplies		17,060	18,489		15,660	17,089
PO Dominican Republic-15, Promotion of Community Water Supplies		17,000	12,000		5,250	5,250
PO Ecuador-21, Promotion of Community Water Supplies	15,254	17,364	18,755	9,927	14,004	15,395
TA El Salvador-12, National Environmental Sanitation Services	16,559			15,649		
PO El Salvador-14, Promotion of Community Water Supplies	19,220	18,031	20,296	3,200	14,231	16,496
TA French Antilles and Guiana-2, <u>Aedes aegypti</u> Eradication	6,667	10,242	11,530	6,167	9,596	10,884
PO Guatemala-17, Promotion of Community Water Supplies	8,000	8,000	8,000	3,500	3,500	3,500
PO Haiti-22, Promotion of Community Water Supplies	18,435	21,519	22,945	14,160	16,394	17,820
PO Honduras-9, Promotion of Community Water Supplies	14,400	18,534	20,691	6,300	14,284	16,441
TA Honduras-10, Port City Development	22,400			9,800		
TA Jamaica-13, <u>Aedes aegypti</u> Eradication		11,766	13,077		10,166	11,477
PR Mexico-26, <u>Aedes aegypti</u> Eradication	25,603	28,919		17,553	20,869	
WR Mexico-35, Environmental Sanitation Training	4,200	4,200	6,200	1,400	1,400	1,400
PO Mexico-39, Promotion of Community Water Supplies	25,699	23,117	27,374	20,314	17,517	21,774
TA Netherlands Antilles-5, Environmental Sanitation	3,400	2,150	2,150			
PO Nicaragua-10, Promotion of Community Water Supplies		19,128	21,501		14,878	17,251
PO Panama-9, Promotion of Community Water Supplies	8,000	19,128	21,501	3,500	14,878	17,251
PO Paraguay-19, Promotion of Community Water Supplies	14,869	16,241	17,844	10,813	14,054	15,459
PO Peru-30, Promotion of Community Water Supplies	18,722	19,757	21,147	11,642	14,777	16,167
TA Peru-30, Promotion of Community Water Supplies	28,160	24,472	20,740	17,560	18,972	15,240

# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
1,000	1,000	1,000		100	100	5,346	2,000	4,300	24,604	20,135	
8,610	20,020	20,020					4,600	4,600	7,800	7,800	7,800
44,014	55,833	57,976	69,164	87,738	91,105	3,144	3,988	4,141	53,445	67,798	70,400
4,622	3,771	7,729						15,126			
3,243						1,053	8,600	38,200			
3,186	3,000	3,186									
1,956	2,223	2,223									
	2,500	2,500									
72,724	88,347	96,434	69,164	87,838	91,205	18,143	27,788	80,467	85,849	100,733	91,500
		1,800	1,300	1,000	1,000						
11,100	6,300	6,300	1,000	2,750	2,350	4,300	4,300	27,910		3,330	3,330
						12,900	23,770				
11,100	6,300	8,100	2,300	3,750	3,350	17,200	28,070	27,910		3,330	3,330
5,400	5,400	5,400									
1,800	1,800	1,800				4,300	5,500	4,300			
4,480	2,400										
760	1,200	1,200					700				
5,160	3,360	3,360									
8,100	8,100	8,100									
	4,250	4,250									
300	1,440	1,440	330								
8,100	8,100	8,100									
3,060	6,060	6,060									
6,300	3,800	3,800									
6,600	6,600	6,600	20,800	20,000	20,000						
3,795	3,795	3,795									
	1,200	1,200		200	200						
3,317	6,750	6,750									
910	3,360	3,360									
3,928	3,800	3,800									
500	646	646									
4,500	4,500	4,500									
4,275	5,125	5,125									
8,100	4,250	4,250									
12,600											
	1,600	1,600									
8,050	8,050										
1,800	1,800	1,800	1,000	1,000	1,000			2,000			
5,385	5,600	5,600									
	4,250	4,250									
4,500	4,250	4,250									
387	2,187	2,385									
2,280	4,980	4,980									
	1,200	1,200	2,000								
						8,600	4,300	4,300			
									3,669		
									4,800		

# SUMMARY OF PROGRAMS BY MAJOR EXPENSE

# E S T I M A

	T O T A L			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
ENVIRONMENTAL HEALTH (continued)						
WR Surinam and Netherlands Antilles-1, <u>Aedes aegypti</u> Eradication		11,918			8,985	
TA Surinam and Netherlands Antilles-1, <u>Aedes aegypti</u> Eradication	16,687	11,286	12,582	13,537	9,786	11,082
PO Uruguay-18, Promotion of Community Water Supplies	9,600	9,600	9,600	4,200	4,200	4,200
PR Venezuela-16, <u>Aedes aegypti</u> Eradication	57,456	59,184	46,768	50,736	51,679	41,068
PO Venezuela-27, Promotion of Community Water Supplies	12,800	17,931	19,921	4,430	15,441	17,431
PO Venezuela-35, Rural Water Supplies	15,281	17,581	19,017	14,381	16,381	17,817
PR Venezuela-38, Rural Housing			18,797			15,287
TA West Indies-1, <u>Aedes aegypti</u> Eradication	18,871	21,699	22,349	17,246	19,572	20,222
TA West Indies-18, Promotion of Community Water Supplies		22,001	20,498		13,875	12,773
PO West Indies-18, Promotion of Community Water Supplies	7,857	7,723	9,052	7,857	7,723	9,052
PR AMRO-8, <u>Aedes aegypti</u> Eradication (Caribbean)		3,000	3,000			
TA AMRO-8, <u>Aedes aegypti</u> Eradication (Caribbean)	26,731	24,487	22,287	18,011	19,516	17,316
WR AMRO-13, Seminar on Sanitary Engineering (Zone III)			3,300			
WR AMRO-39, Environmental Sanitation (Advisory Committee and Consultants)	11,100			2,800		
PR AMRO-39, Environmental Sanitation (Advisory Committee and Consultants)	5,357	3,500	7,630	2,500	1,050	1,050
PR AMRO-50, Water Fluoridation			5,200			1,400
PR AMRO-52, Public Health Aspects of Housing and Urbanization	22,600	52,485	55,440	19,177	21,785	38,920
PR AMRO-88, <u>Aedes aegypti</u> Eradication	19,800	26,600	39,508	9,425	4,200	15,908
PR AMRO-95, Environmental Sanitation (Caribbean)	12,760	25,589	28,067	11,141	20,589	23,067
TA AMRO-95, Environmental Sanitation (Caribbean)	31,933	33,594	34,402	25,727	28,572	29,380
PR AMRO-151, Seminar on Teaching of Sanitary Engineering in Schools of Engineering			43,719			5,600
PR AMRO-187, Promotion of Community Water Supplies		16,800	16,800		7,350	7,350
PO AMRO-187, Promotion of Community Water Supplies	34,284	56,827	108,564	27,984	40,222	62,959
PO AMRO-204, Sanitary Engineering (Zone I)		6,000	8,000			
PR AMRO-204, Sanitary Engineering (Zone I)		40,894	48,084		29,294	27,884
WR AMRO-204, Sanitary Engineering (Zone I)	4,300					
PR AMRO-205, Sanitary Engineering (Zone II)		11,406	7,220		2,806	2,920
PO AMRO-205, Sanitary Engineering (Zone II)		7,000	9,000			
WR AMRO-205, Sanitary Engineering (Zone II)	8,600	24,184	27,846		21,704	16,766
PR AMRO-206, Sanitary Engineering (Zone III)		16,921	10,762		4,021	4,189
PO AMRO-206, Sanitary Engineering (Zone III)		7,000	9,000			
WR AMRO-206, Sanitary Engineering (Zone III)	12,900	23,278	28,705		20,278	19,378
PR AMRO-207, Sanitary Engineering (Zone IV)		33,271	32,140		19,071	17,940
PO AMRO-207, Sanitary Engineering (Zone IV)		7,000	9,000			
WR AMRO-207, Sanitary Engineering (Zone IV)	18,174			15,174		
PR AMRO-208, Sanitary Engineering (Zone V)		32,543	29,753		21,343	18,553
PO AMRO-208, Sanitary Engineering (Zone V)		4,000	9,000			
WR AMRO-208, Sanitary Engineering (Zone V)	9,800					
PR AMRO-209, Sanitary Engineering (Zone VI)		37,194	41,607		20,644	25,057
PO AMRO-209, Sanitary Engineering (Zone VI)		7,000	9,000			
WR AMRO-209, Sanitary Engineering (Zone VI)	35,037			20,069		
PR AMRO-234, Sewage Disposal and Water Pollution Control	4,800	12,000	20,000	2,400	4,900	11,900
WR AMRO-236, Refuse and Garbage Disposal	6,400	9,655	15,000		2,100	3,500
PO AMRO-242, Seminars on Water Supply Design, Construction, and Management	30,000			3,850		
PO AMRO-243, Conference on Development of Water Supplies	30,000			2,800		
PR AMRO-276, Sewage Treatment and Disposal	36,200					
PR AMRO-277, Manual on School Sanitation	3,200	5,000	4,800	1,400	2,100	2,100
PR AMRO-279, Study Group on Water Quality Standards	3,200			1,400		
WR AMRO-323, Regional Conference on Environmental Sanitation			30,000			1,400
PO AMRO-327, Courses in Management of Water Works		51,570	49,800		4,200	4,200
Total - Environmental Health	1,009,086	1,316,977	1,497,157	592,635	848,940	916,057



# T E D      E X P E N D I T U R E

DUTY TRAVEL			SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER		
1962	1963	1964	1962	1963	1964	1962	1963	1964	1962	1963	1964
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
3,150	2,933										
5,400	1,500	1,500									
6,720	5,400	5,400									
5,400	7,505	5,700									
	2,490	2,490						2,970			
900	1,200	1,200									
1,625	1,710	1,710									1,800
	2,127	2,127									
	2,238	5,087									
				3,250					2,638		2,638
					3,000						
5,720	4,971	4,971	3,000		3,000						
											3,300
3,600			1,500					3,200			
2,757	2,250	6,380	100	200	200						
		1,800			2,000						
3,423	9,890	15,120		1,400	1,400						
3,300	5,400	6,600	7,075	17,000	17,000			19,410			
1,619	5,000	5,000									
6,206	5,022	5,022									
		11,609			2,000						24,510
5,200	9,450	9,450									
	16,605	45,605	800								300
				3,000					3,000		8,000
	3,000	3,000							8,600		17,200
								4,300			
									8,600		4,300
				3,000					4,000		9,000
	2,380	2,380		100	100			8,600			8,600
								12,900			6,573
									4,000		9,000
	3,000	3,000						12,900			6,327
	2,200	2,200							12,000		12,000
3,000					3,000				4,000		9,000
	2,600	2,600							8,600		8,600
									4,000		9,000
	3,650	3,650						9,800			
				3,000					12,900		12,900
									4,000		9,000
2,968								12,000			
2,400	6,300	8,100		800							
6,400	2,700	6,645							4,855		4,855
5,250			800					20,100			
3,600			2,100					21,500			
								28,800			7,400
1,800	2,700	2,700		200							
1,800											
	5,400	5,970									20,630
		5,400		3,000	3,000						37,200
196,625	237,764	292,017	39,505	65,150	49,900	164,152	165,123	237,183	16,169		2,000

## E S T I M A

SUMMARY OF PROGRAMS  
BY MAJOR EXPENSE

	T O T A L			PERSONNEL COSTS		
	1962	1963	1964	1962	1963	1964
	\$	\$	\$	\$	\$	\$
EDUCATION AND TRAINING						
WR Argentina-18, Medical Education	7,500					
PR Brazil-59, Teaching of Preventive Medicine (University of Ceará)		20,489	26,122		12,989	14,322
PR Chile-37, Medical Education	12,900	13,000	16,000	4,400	1,400	2,800
PR Haiti-19, Medical Education	22,400	21,860	18,774	17,285	16,110	17,824
PR Jamaica-4, Department of Preventive Medicine (UCWI)		4,300				
WR Jamaica-4, Department of Preventive Medicine (UCWI)		12,414	18,731		11,904	13,921
WR Mexico-32, Medical Education	5,900	4,800	17,700	700	2,100	2,100
PR Mexico-32, Medical Education		12,900				
PR Nicaragua-13, Medical Education			14,900			4,200
PR Venezuela-17, Medical Education	19,088	18,200	18,200	14,638	4,200	4,200
WR AMRO-18, Medical Education	23,400	28,016	36,800	4,200	5,600	7,700
PR AMRO-101, Course for Medical Librarians			14,975			
PR AMRO-210, Medical Education (Zone VI)	9,698	16,685	18,122	8,738	15,725	17,162
PR AMRO-237, Medical Education (Zone III)	17,383	26,199	27,069	8,783	14,599	15,469
PR AMRO-272, Group Study of Medical School Organization	17,200	18,476	18,592	2,000	1,400	2,800
PR AMRO-313, Medical Education (Zone II)		15,398			12,398	
Total - Education and Training	135,469	212,737	245,985	60,744	98,425	102,498
OTHER PROJECTS						
PR AMRO-35, Fellowships for Health Services	56,087	61,879	62,000			
PR AMRO-81, Pan American Zoonoses Center	43,842	63,908	69,171	19,455	36,527	34,343
PO AMRO-81, Pan American Zoonoses Center	101,322	108,694	108,669	82,266	89,745	91,124
TA AMRO-81, Pan American Zoonoses Center	43,570	45,970	46,356	42,040	41,180	41,566
PR AMRO-283, Coordination of International Research	15,223	19,504	34,873	15,223	19,504	34,873
PO AMRO-283, Coordination of International Research	115,192	45,942	26,661	80,307	45,942	26,661
PR AMRO-309, Program Evaluation	4,773			4,773		
Total - Other Projects	380,009	345,897	347,730	244,064	232,898	228,567
PO AMRO-77, Pan American Foot-and-Mouth Disease Center	537,808	670,000	852,330	338,132	474,800	571,472
TOTAL - ALL SUBJECTS AND ALL FUNDS	10,027,081	11,807,028	12,775,584	6,325,733	7,430,420	7,666,897





**NARRATIVE EXPLANATIONS**



## PART I

## PAN AMERICAN HEALTH ORGANIZATION - ORGANIZATIONAL MEETINGS

CHAPTER 1 - Conference and Translation Section  
(See page 120)

In August 1961 when the Conference and Publications Branch was dissolved, this Section was attached to the Management and Personnel Branch.

Included in this Chapter are the estimates for the Section Chief; the Arrangements and Documents Units of Meeting Services; and Languages Services.

No change in the number of posts is contemplated for the three years displayed.

CHAPTER 2 - Meetings of the Pan American Sanitary Conference, Directing Council and WHO Regional Committee  
(See page 120)

Provision is made for the 1963 meeting of the Directing Council to be held in Washington and for the 1964 meeting of the Directing Council to be held at a site other than the Headquarters city, as well as for the Executive Committee meetings held at the same time. The amounts shown are the estimated actual requirements for each meeting. The higher cost in 1964 as compared with 1963

reflects the estimated difference in cost of a meeting held away from Headquarters city in 1964 as compared with one held in Washington.

CHAPTER 3 - Meetings of the Executive Committee  
(See page 120)

This contains the estimated cost of the spring meeting of the Executive Committee, which is usually held in Washington. The estimate for 1964 is the same as that for 1963. In accordance with Resolution III of the 46th Meeting of the Executive Committee, the estimates include provision for a per diem allowance of \$30 for the members of the Executive Committee. This per diem is equivalent to the rate established by the World Health Assembly in Resolution WHA 14.5 for members of the WHO Executive Board while attending meetings in New York.

CHAPTER 4 - Temporary Personnel (See page 120)

Provision is made for temporary personnel for conferences and related activities. No change in amount is anticipated for the years displayed.

## PART II

## PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS

SECTION 1 - Executive Offices (See page 122)

In this section is presented the Office of the Director, to which are attached the Office of Planning, the Office of Public Information, and the Office of Evaluation and Reports.

Since publication of the previous official budget document (OD 35) the Executive Offices have been reorganized to include an Office of Planning to coordinate and promote the development of national and regional health planning and cooperation with other international agencies participating in development under the Charter of Punta del Este. The Office of Evaluation and Reports, part of which was formerly in the Office of the Director, is now displayed as a separate chapter.

No change is planned in the number of posts in the first three offices, but an increase of one post, Medical Officer, is proposed under WHO funds starting in 1963 for the Office of Evaluation and Reports. There are no increases in duty travel or information activities.

The Office of the Director also includes the Office of Coordination of Research which is identified as project AMRO-283, and for which narrative justification and cost estimates may be found, by reference to the Table of Contents, among the interzone projects.

SECTION 2 - Technical Services (See page 124)

In this section are shown the six branches formerly shown in two technical divisions and the new Health Statistics Branch which was formerly part of the Communicable Diseases Branch. They are supervised by the Office of the Director.

These technical branches, in addition to developing and recommending policy, standards, procedures, and guides in their respective areas of responsibility, supervise interzone projects and provide advisory services to the field establishments and to Member Governments.

A net increase of two posts will be noted for 1963; one of these is for a Housing Officer in the Environmental Sanitation Branch and the other is a clerk-stenographer for the Health Promotion Branch. Two other posts in the Fellowships Branch are transferred from Special Malaria Fund to PAHO Regular funds in 1963.

SECTION 3 - Administration (See page 130)

This section comprises the Office of the Chief, the Budget and Finance Branch, and the Management and Personnel Branch.

Since the previous budget document was published the Management and Personnel Branch has been modified to include the Supply and General Services Offices which formerly operated separately. The Distribution Unit has been transferred from the General Services Office to Part III, Section 3, Editorial Services and Publications. In addition, the Management and Personnel Branch has attached to it the Conference and Translation Section for which the budget presentation is made in Part I, Chapter 1.

The only change in post strength in this section of the budget is an increase of two posts in the Management and Personnel Branch. These posts are shown in the General Services unit and relate specifically to occupancy of the new Headquarters building; they are budgeted as from July 1964. The item for audit costs is carried at the same level for both years.

SECTION 4 - Temporary Personnel (See page 134)

The estimate for this section represents the continuation of the need for temporary personnel to replace staff on extended sick or maternity leave and to meet short-term work load requirements for which it would be uneconomical to maintain full time staff. The higher amount in 1964 is in anticipation of increased activity.

SECTION 5 - Common Services - Headquarters (See page 134)

The estimates for the various Common Services for the Washington Office are shown by major expense items in the schedules. All costs are apportioned on a pro rata basis between funds budgeted under PAHO and WHO, except for the Acquisition of Capital Assets which are charged directly to the appropriate sources of funds.

The increase for 1963 reflects a revision of requirements, the largest items for which are rent and maintenance and increased communications costs.

In anticipation of occupancy of the new Headquarters building in mid-1964, provision is made in the 1964 figure for maintenance of the larger premises and for some additional office equipment.



## PART III

PAN AMERICAN HEALTH ORGANIZATION  
FIELD AND OTHER PROGRAMS

## Zone Offices

The field operations of the PAHO/WHO are under the immediate supervision of six representatives who have jurisdiction over the following zones:

Zone I : Venezuela; the departments of France in the Americas; Surinam and the Netherlands Antilles; the West Indies and territories of the United Kingdom in the Americas; Puerto Rico; and U.S. Virgin Islands. The Zone Office is located in Caracas, Venezuela.  
(See page 136)

Zone II : Cuba; Dominican Republic; Haiti; and Mexico. The Zone Office is located in Mexico, D.F., Mexico.  
(See page 160)

Zone III : Costa Rica; El Salvador; Guatemala; Honduras; Nicaragua; Panama; and British Honduras. The Zone Office is located in Guatemala City, Guatemala.  
(See page 182)

Zone IV : Bolivia; Colombia; Ecuador; and Peru. The Zone Office is located in Lima, Peru.  
(See page 208)

Zone V : Brazil. The Zone Office is located in Rio de Janeiro, Brazil. (See page 226)

Zone VI : Argentina; Chile; Paraguay; and Uruguay. The Zone Office is located in Buenos Aires, Argentina.  
(See page 240)

Relations with Canada and the United States are under the jurisdiction of the Washington Office. A Field Office in El Paso, (AMRO-307), is budgeted under Washington Office - Country Programs, and is concerned with the stimulation of cooperative health activities along the border between Mexico and the United States.

Under the plan of decentralization the Washington Office is responsible for provision of certain technical and administrative services that can be carried out more efficiently from a central headquarters, i.e., responsibility and authority for relations with the Governing Bodies

of the Organization, central technical services such as statistics, etc.

The zone offices are responsible for the field operations of PAHO/WHO and for direct technical advice to national health authorities. This system assures that projects will be planned in cooperation with the national health personnel who will be responsible for their execution, and thus in a manner appropriate to local conditions.

In a study on decentralization presented to the Executive Committee at its 43rd Meeting, an analysis of zone office functions showed that many of the zone office staff devoted as much as 80 per cent of their time to country activities. Aside from the Zone Representative, his Deputy, the Administrative Officer, and some clerical and administrative staff, the rest of the zone staff are technical personnel concerned with projects covering one or more countries within the zone. Consequently, the Sanitary Engineer and the Nurse, a total of 12 professional posts, are being shown as intercountry projects in their respective zones, starting in 1963. A total of 13 secretarial staff who serve these and other zone advisers in health education, nutrition, statistics, etc., are also shown on intercountry projects starting in 1963.

The estimates for the zone offices are arranged as in previous years. Duty travel and common staff costs for personnel of the offices appear under the personal services estimates for each zone; common services costs for the operation of each Office are similarly shown. In general, the estimates conform to those of previous years.

The provisions for home leave and dependents' allowance cause some fluctuation between years in common staff costs, since computations are based on known eligibility at the time of preparation of this document. Common services estimates are based on the experience of previous years. The item for Acquisition of Capital Assets is for the purpose of replacing obsolete equipment. Estimates for local expenditures have been based on the rates of exchange prevailing at 1 January 1962 and some fluctuation in costs as compared with those of previous years has been reflected, owing to change in rates.

## PART III

## ZONE I

Zone Office (See page 136)

For text see "Zone Offices," page 39.

FRANCEFRENCH ANTILLES AND GUIANA-2, Aedes aegypti Eradication  
(See page 136)

This project is part of the hemisphere-wide Aedes aegypti campaign. (See description for AMRO-8.)

A. aegypti had been eradicated in French Guiana but in 1959 reinfestation was found along the coast and measures were taken immediately to eliminate it. The Department is now negative. The campaign in Guadeloupe and the French part of St. Martin is delayed by administrative difficulties and needs reorganization. Susceptibility tests of the A. aegypti in Guadeloupe demonstrated resistance to DDT. A. aegypti infestation persists in Martinique and no operations are underway.

This project is under the technical supervision of the medical officer of AMRO-8 assisted by a sanitarian assigned to this project. Provision is also made for supplies and equipment.

FRENCH ANTILLES AND GUIANA-3, PAHO Fellowships for Health Services (See page 136)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

KINGDOM OF THE NETHERLANDSNETHERLANDS ANTILLES-5, Environmental Sanitation  
(See page 138)

Reorganization of public health services in several islands of the Netherlands Antilles is planned. The engineer of Zone I has visited each of the islands and a comprehensive report and recommendations on environmental sanitation have been presented to the Government. The need for improved sanitation is clear, diarrheal diseases and intestinal parasitism being among the principal health problems.

Additional training in environmental sanitation has been recommended. Provision is made for fellowships to help meet this need.

NETHERLANDS ANTILLES-6, WHO/TA Fellowships for Health Services (See page 138)

Health services for a group of islands present many complex problems in administration. Fellowships are provided, in order to collaborate with the Government in training its staff for the improvement and expansion of its health services.

NETHERLANDS ANTILLES-7, WHO/TA Fellowships for Nursing Services (See page 138)

The main feature of the health organization of the Netherlands Antilles is good medical care, but preventive aspects are still to be developed. The public health nurse has an essential role in providing the necessary complement to medical attention but the number of nurses with public health training is very limited.

Provision is made for fellowships in public health nursing.

SURINAM-1, Malaria Eradication (See page 138)

The Tripartite Plan of Operations was signed in December 1957 and the Malaria Eradication Program was started in May 1958. Originally it was planned to spray the houses on the coast and savannah areas with DDT twice a year for 7 cycles and in the interior with dieldrin once a year for 4 cycles. However, due to administrative and technical difficulties which resulted in insufficient coverage in the interior, the plan was modified in January 1961. In the coastal area, where malaria transmission was interrupted, spraying operations were discontinued and malaria surveillance introduced. In the interior and savannah areas, where malaria transmission still exists, DDT residual spraying has been applied twice a year since January 1961.

Epidemiological evaluation has been carried out by the evaluators and the information posts in all the areas in the country. During 1961, a total of 13,155 blood smears were taken from the 114,159 inhabitants on the coast now under malaria surveillance, but no autochthonous cases were found. On the other hand, 21,418 blood smears taken from 56,332 inhabitants under spraying protection uncovered 645 cases of malaria. The continued transmission in the interior is due to the insufficient coverage with DDT house spraying because of the extremely difficult working conditions and the uncooperative attitude of the primitive population.

It is planned to intensify the health education activities and to intensify the supervision of work in order to accomplish better coverage of houses with insecticides and to eradicate malaria from the interior. Entomological studies will also be intensified in order to find out if there are any other entomological factors which cause the continuation of malaria transmission in the interior. The malaria surveillance program on the coast will be continued and special attention will be paid to detect any imported cases from the interior through the surveillance network. UNICEF will continue to provide insecticides, outboard motors, vehicles and other equipment and supplies needed.

The Organization provides one medical officer, one health educator, one entomologist, and three sanitarians. Advisory services are also available through the Zone Advisory Team. Provision is also made for anti-malarial drugs and a limited amount of equipment and supplies which will not be provided by UNICEF.

SURINAM AND NETHERLANDS ANTILLES-1, *Aedes aegypti* Eradication (See page 138)

This project is part of the hemisphere-wide *Aedes aegypti* eradication campaign (see AMRO-8).

In the Netherlands Antilles the islands of Aruba, Bonaire, Saba, and St. Eustace continue to be negative for *A. aegypti*. The campaign in Curaçao is about to be completed, but requires greater attention.

In Surinam, indices of *A. aegypti* infestation are high. Negotiations with the Government to initiate spraying operations are continuing. DDT resistance has been verified in some areas.

Provision is made for a sanitarian who will reside in Curaçao until the end of 1962; he will then be transferred to Paramaribo where it is hoped to undertake eradication activities early in 1963.

SURINAM AND NETHERLANDS ANTILLES-2, PAHO Fellowships for Health Services (See page 138)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

UNITED KINGDOM

BAHAMAS-1, *Aedes aegypti* Eradication (See page 140)

*Aedes aegypti* is the vector for urban yellow fever. Eradication of the vector will eliminate this disease from cities and will reduce the danger of transmitting the yellow fever virus between countries. Since 1947 the Organization has devoted concentrated efforts toward eradication of the vector from the Western Hemisphere.

This project is a part of the campaign for eradication of the urban yellow fever vector, *Aedes aegypti*, from all the British areas in the Caribbean.

Technical guidance is provided by a medical office assigned to a project covering the entire Caribbean area (AMRO-8).

In the Bahamas activities have been lately limited to air and sea ports which are kept free of the vector. Operations should be extended to other areas of the islands to provide complete coverage and to eradicate *Aedes aegypti*.

Provision is made for a sanitarian to assist in this campaign. Fellowships are provided in 1963.

BAHAMAS-3, Health Services (See page 140)

The total area covered by the Bahamas group is some 4,400 sq. miles. Twenty-one islands are inhabited. The population is estimated at 130,000. Approximately half of the population lives in the island of New Providence and the other half in the "Out Islands". Health activities are carried out in the central hospitals in New Providence and through a system of 40 dispensaries. Each dispensary is visited only once a week by one of the eight governmental medical officers assigned to the "Out Islands". During the remainder of the time the dispensaries are attended by nurses. Preventive medicine is, at best, in its beginning stages. Environmental sanitation activities are limited to New Providence and are carried out by 4 health inspectors and other auxiliaries with limited training.

The objective of this project is to expand and improve the health services in the "Out Islands" by means of a chain of health centers, properly staffed with trained personnel. Special attention will be given to maternal and child health services and to environmental sanitation activities through a program of construction of latrines and water supplies.

Provision is made for a medical officer and for fellowships in 1963 and 1964.

BRITISH GUIANA-5, Malaria Eradication (See page 140)

A comprehensive residual house-spraying program, begun in 1947, has eradicated malaria from the densely populated (450,000) coastal region. Barrier spraying on a limited scale has been applied in strategic areas in order to prevent the reintroduction of malaria from the interior. This kept the coastal area free of malaria until the middle of 1961 when a reinfection was observed and a small focus of transmission was established on the banks of one of the main rivers. Efforts have been made to eliminate this focus. In view of this experience, it is planned to intensify the barrier spraying program and at the same time to establish an adequate surveillance scheme for the entire coastal area.

The distribution of chloroquinized salt in the interior of British Guiana was started in January 1961. The program has been well received by the public and the cooperation of the salt dealers has been excellent. Medicated salt has already reached more than 90 per cent of the houses examined in the interior in nine months. During January - November 1961, 226,564 lbs. of chloroquinized salt were distributed. It is planned that the distribution of chloroquinized salt be continued until the end of 1963.

UNICEF is providing insecticides, transportation, a mixing machine and plastic bags for the distribution of the medicated salt and laboratory equipment and supplies.

Provision is made for two sanitarians, for short-term consultants, and for drugs. Fellowships are provided in 1963. In addition, advisory services are available through the Zone Malaria Advisory Team (AMRO-117).

BRITISH GUIANA-9, Nutrition

(No budgetary provision - advice of regular staff only)

The Government plans to develop a combined action in which the resources of the Ministries of Public Health, Agriculture and Education will be integrated to evaluate

the nutritional status of the population through a survey in 1962; develop a national nutrition program based on this survey's findings; and, train personnel at the professional and sub-professional levels for the extension of the program.

The program will cover a population of 102,000 and 43 schools with an enrollment of 26,400 children. Eleven health centers and 4 hospitals will also be included.

The environmental sanitation program will be intensified particularly in water supply, food hygiene including sanitation in markets, food stores and public eating places.

WHO, FAO and UNICEF will cooperate in the project.

Advisory services to this project will be provided by the Zone I Nutrition Consultant.

#### BRITISH GUIANA-10, National Health Services (See page 140)

The aim of this program is to expand the network of rural health centers and services through the reorganization and integration of the country's curative and preventive services. Thirty-three rural health centers and a modern health center in Georgetown will be added, making a total of 44 in the country. It is also planned to improve and expand water supply services, to establish a public health laboratory and to extend health education activities. All the schools of the country are to be provided with sanitary installations.

Services at the departmental level will be established in each of the three departments of the country and staffed with at least a medical officer, a nurse, and a sanitary inspector. There will also be 16 district medical officers, and each health center will have at least one nurse-midwife.

UNICEF is providing equipment and supplies for the health centers and the laboratory, and for environmental sanitation and health education activities.

Provision is made for a medical officer and a sanitary engineer to advise on this program.

#### BRITISH VIRGIN ISLANDS-1, *Aedes aegypti* Eradication (See page 142)

*Aedes aegypti* is the vector for urban yellow fever. Eradication of the vector will eliminate this disease from cities and will reduce the danger of transmitting the yellow fever virus between countries. Since 1947 the Organization has devoted concentrated efforts toward eradication of the vector from the Western Hemisphere.

This project is a part of the campaign for the eradication of *Aedes aegypti*, from all British areas in the Caribbean. In the British Virgin Islands, the spraying programme started in 1960 and is progressing favorably.

Technical guidance is provided by a medical officer assigned to a project covering the entire Caribbean area (AMRO-8). Provision is made for one sanitarian.

#### JAMAICA-2, Malaria Eradication (See page 142)

The plan for malaria eradication was made in 1957 and total coverage with residual house spraying was launched in January 1958, although the Tripartite Plan of Operations was

not signed until February 1959. There is a population of 1,650,000 on the island of whom 1,280,000 live in the malarious area. At the beginning, dieldrin was the insecticide used in the program. In 1959, the vector *Anopheles albimanus* was found to be resistant to dieldrin and a change of insecticides to DDT was made gradually during the course of the year. By the end of 1959, the shift of insecticides was completed and since then DDT residual house spraying has been conducted in semi-annual cycles.

The spraying program finished ahead of the target time schedule set in the original TPO. In January 1962, spraying operations were discontinued and since then the island has been placed under malaria surveillance.

An evaluation network has been very well developed since early 1960 utilizing the organization of the local health units and evaluators. In 1960, a total of 184,534 slides were examined, of which 135 were positive for malaria. In 1961, 292,902 slides were examined and 31 positive cases were found. The last case of *P. falciparum* was recorded in June 1961 and since then no autochthonous cases have been found. During June-October 1961, 8 cases of *P. malariae* were found in the island, but they were proved to be relapsing cases. After October 1961, not a single case of malaria was found in spite of an intensive search.

The malaria surveillance program will be continued until the end of 1964 when the program will enter its maintenance phase, should no further autochthonous cases be found.

For malaria surveillance UNICEF will continue to provide laboratory supplies and spare parts for vehicles.

The Organization, in view of the progress made by the program, will reduce the number of the project consultants from the 4-member team to one sanitarian. However, the advisory services of the Zone Advisory Team will still be made available and the provision of anti-malarial drugs will be made as necessary.

#### JAMAICA-4, Department of Preventive Medicine, UCWI (See page 142)

The University College of the West Indies has taken the responsibility to train physicians for a large portion of the Caribbean area.

The Faculty of Medicine and the directing bodies of the College are planning to establish and develop a full-fledged Department of Preventive Medicine. The main objective is to integrate social and public health aspects within the general curriculum beginning in the first year of study. To reach this aim, it is necessary to reorganize and expand the present department both in functions and physical facilities. Functions will cover the fields of statistics, epidemiology, preventive medicine, teaching of social aspects and research.

The authorities of the University College have requested technical assistance to make first a study of the actual organization of the teaching and framework of the curriculum. This study will be included in an analysis of the needs and resources, especially related to facilities and space, laboratory equipment and supplies.

Appropriate action has been taken to perform such a study in 1962 through PARO/WHO short-term consultants. Based on the conclusions and recommendations of the study,

a long range program will be carried out with the assistance of the Organization in the following years.

Provisions have been made for a medical educator beginning in 1963. Fellowships are also provided.

JAMAICA-11, Public Health Training Station (See page 142)

The British West Indies Training Station was organized in 1943 in order to promote the education and training of all types of public health workers in the West Indies.

The Station has already trained a large number of sanitary inspectors. Jamaica at present has one sanitary inspector for every 5,100 inhabitants. The shortage of physicians and nurses has made it necessary for sanitary inspectors to discharge many of the functions usually performed by physicians and nurses, a fact which is reflected in the curriculum of the Station.

In 1959 a consultant reviewed the curriculum and made recommendations concerning it and other aspects of the work of the Station. These recommendations will bring about a better balance between the various categories of personnel trained, and at the same time an improvement in the specialized training of sanitarians and nurses.

In 1961 a survey was made of the work carried out by sanitarians and nurses. With the information obtained, three basic tabulations are being prepared for the following purposes: (a) to obtain a detailed analysis of the time devoted to each activity by the personnel and supervisors; (b) to show the participation of sanitarians and nurses in the various health activities; and (c) to show the time spent by sanitarians and nurses in health, sanitation, and related activities.

As soon as these tabulations are completed, a study will be made of the activities carried out by this personnel; the findings could lead to a reorganization of functions and to a modification in the training program for sanitarians and nurses.

The staff of the Organization and short-term consultants (1962 and 1963) will continue to provide advisory services.

JAMAICA-13, Aedes aegypti Eradication (See page 142)

Aedes aegypti is the vector for urban yellow fever. Eradication of the vector will eliminate this disease from cities and will reduce the danger of transmitting the yellow fever virus between countries. Since 1947 the Organization has devoted concentrated efforts toward eradication of the vector from the Western Hemisphere.

This project is a part of the campaign for the eradication of Aedes aegypti from all British areas in the Caribbean.

Under this project, international sanitarians, assigned to specific areas, work under the technical guidance and supervision of a medical officer, who, under the regional project AMRO-8, provides advisory services to British, French and Dutch areas in the Caribbean.

Beginning in 1963, provision is made for a sanitarian to assist with the campaign in Jamaica.

TRINIDAD-3, Malaria Eradication (See page 144)

Trinidad and Tobago were known to be very malarious and in 1944 there were 7,115 cases of malaria recorded out of 20,504 slides submitted by the physicians. Since that time, a malaria control program has been conducted by the Government until 1958 when it was converted into malaria eradication. The basic plan of operations was signed by the Government, UNICEF and PASE/WHO in June 1959, but the program was actually launched in January 1959, by means of DDT residual house spraying in the area where Anopheles aquasalis is the vector and mass chemotherapy in the area where Anopheles bellator is the vector.

By the end of 1960, malaria transmission seemed to have been interrupted and since September 1960 no autochthonous cases have been reported. Both spraying operations and mass chemotherapy were discontinued at the end of December 1961 and the islands have been under malaria surveillance since January 1962. In 1961 a total of 113,166 slides were examined, but no autochthonous cases of malaria were found.

It is planned to continue the malaria surveillance activities until 1964 and then the program will enter its maintenance phase. Malaria surveillance networks are well organized by the evaluators and the Government clinics.

UNICEF will continue to provide laboratory supplies and spare parts for the vehicles.

The Organization will continue to provide the advisory services through the Zone Advisory Team and fellowships for 1962.

WEST INDIES-1, Aedes aegypti Eradication (See page 144)

The purpose of this project is to eradicate the Aedes aegypti from all the British areas in the Caribbean so that the area will no longer be receptive to yellow fever.

The following islands are negative for Aedes aegypti or are in process of being declared negative: Barbuda, Grenada, Monserrat, St. Kitts, St. Vincent, Nevis, and Tobago. In 1961 two infestations occurred: one in Trinidad and one in St. Lucia; corrective measures were taken promptly. Active campaigns are under way or planned in the Grenadines, Anguilla, Dominica, Jamaica and Barbados.

Provision is made for one sanitarian to be stationed in Barbados and a second in Antigua.

WEST INDIES-3, Nursing Services (See page 144)

Since September 1959 technical advice on nursing service has been provided to various territories in the Eastern Caribbean.

Time studies of public health nursing functions have been done in Barbados and Trinidad as a basis for planning for the extension and improvement of existing services. In St. Lucia assistance has been given to the establishment of an in-service education program for nurses in both public health and hospital services. A conference on tuberculosis nursing was held in Barbados and has stimulated interest in regular planned in-service education programs. Assistance has been given to UNICEF-aided programs in Trinidad and British Guiana.

The nursing adviser will continue to provide assistance in the training of national nurses and in the improvement and expansion of nursing services, both preventive and curative, in cooperation with WHO/UNICEF assisted projects. Assistance will be extended to other territories on the basis of need and interest.

Provision is made for two nursing advisers to cover the whole area.

WEST INDIES-4, PAHO Fellowships for Health Services  
(See page 144)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

WEST INDIES-6, Public Health Legislation (See page 144)

A consultant has surveyed the present health legislation, assisted in the unification and modernization of the health ordinances and in the preparation of a new sanitary code. This assignment was completed for Trinidad in 1960. A second consultant is to study the quarantine regulations in 1962.

To prepare recommendations on ways of applying these new laws and regulations to the other areas in the Caribbean, provision is made for short-term consultants in 1962.

WEST INDIES-12, Nursing Education (See page 144)

The nursing training schools within the British areas of the Caribbean vary considerably. As the first step toward improvement and uniformity, a survey is planned of all training schools for nurses. Following this it is expected that the establishment of regional nursing schools might serve several islands in order to utilize better the available trained teaching personnel and equipment.

The evaluation of the schools will be carried out in 1963 with the assistance of a nursing advisor working with local visiting committees. Following the survey, assistance will be given to various areas to improve present schools or to establish regional schools as needed.

Provision is made for one nurse educator in 1962 and for a second beginning in 1963. Fellowships are also provided.

WEST INDIES-18, Promotion of Community Water Supplies  
(See page 144)

Extensive problems in the technical, legal, and economic aspects of water supplies exist in the West Indies. Consultant services are being requested by governments in studies leading to sound financing, planning, operation and administration of existing services. Cooperation will also be needed to develop new systems, as well as to find ways of financing improvements and extension of existing services.

In some cases direct assistance will be given in carrying out studies and preparing complete water supply

projects for consideration by international agencies for financing.

Consultant services are to be made available for St. Lucia in 1962 and to other governments in 1963 and 1964. Fellowships are also provided in 1963 and 1964.

Provision is made for a sanitary engineer, a draftsman, and fellowships. In 1963, provision is also made for limited supplies.

WEST INDIES-22, Nutrition  
(No budgetary provision - advice of regular staff only)

This is a program of applied nutrition in schools and communities under the joint auspices of the agriculture, education and health authorities. The objective of this project is to improve the level of nutrition through training courses for local personnel, school gardens and nutrition education in schools and health centers.

UNICEF is already collaborating in the program in Trinidad and Tobago. Similar projects are planned for St. Kitts and St. Lucia.

FAO and WHO provide technical assistance through their regular staff and fellowship programs.

WINDWARD ISLANDS-2, Malaria Eradication (See page 146)

St. Lucia: Total population 92,000. Population in malarious area: 68,000.

The malaria control program was converted into malaria eradication in January 1956. Since then DDT residual house spraying was conducted until September 1959. The island has been under malaria surveillance since the discontinuation of spraying. St. Lucia was once one of the most malarious islands in the Caribbean, but it is now completely free of malaria transmission, the last autochthonous case having been recorded in June 1959. The final project report is now being prepared to register the island in the list of countries in which malaria has been eradicated. The program will enter its maintenance phase after the registration.

Grenada: Total population 88,000. Population in malarious area: 35,000.

The malaria eradication program in Grenada was launched in February 1957 following the plan of operations signed by the Government, UNICEF and PASB/WHO in August 1956. During the three year period, February 1957 - January 1960, 6 cycles of DDT residual house spraying were completed and the program entered its consolidation phase. The last case of malaria was recorded in March 1959, and therefore, the island is ready for registration in the list of countries in which malaria has been eradicated. The program will enter its maintenance phase in April 1962.

Dominica: Total population 60,000. Population in malarious area: 12,000.

The Tripartite Plan of Operations was signed by the Government, UNICEF and PASB/WHO in April 1959 and the malaria eradication program was launched in June 1959. DDT residual house spraying is now being continued and it

will be completed in September 1962. Epidemiological evaluation network is now being developed. In 1961, a total of 10,597 blood smears were examined of which 3 cases of malaria were found.

The program will enter its consolidation phase in September 1962.

UNICEF will continue to provide insecticides and laboratory supplies for Dominica during 1962-1965.

The Organization, in view of the progress made by the programs, will withdraw one of the two sanitarians in 1962. The sanitarian who remains with the project is stationed in Dominica. Advisory services are available through the Zone Advisory Team. Provision is also made for Dominica for antimalarial drugs and in 1963 for a fellowship.

#### VENEZUELA

##### VENEZUELA-2, Mental Health (See page 146)

Short-term consultants are provided in 1962 to study and make recommendations on the mental hygiene program in Venezuela.

##### VENEZUELA-7, Malaria Eradication (See page 146)

Fellowships are provided in 1962 in order to collaborate with the Government in its malaria eradication campaign.

##### VENEZUELA-9, PAHO Fellowships for Health Services (See page 146)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement of expansion of its health services.

##### VENEZUELA-11, Plague Investigation (See page 146)

In recent years the Organization has collaborated in studies on plague in Bolivia, Ecuador, Peru and Brazil. In 1959-60 the Organization collaborated with Venezuela through the services of a consultant in an epidemiological survey of plague in the country.

In order to amplify these studies, provision is made in 1963 and 1964 for a consultant to collaborate further with the Government.

##### VENEZUELA-14, Nursing Education (See page 146)

The basic nursing course in Venezuela prepares the graduate nurse to give nursing care to the sick. However, very often they must assume responsibility for administration and teaching. There is approximately one graduate nurse for every four nursing auxiliaries, many of whom had

no training. Consequently, courses are needed to prepare the senior nurses for administration and for teaching.

The purpose of this project is to assist in establishing post-basic courses in administration and teaching within the School of Public Health, and to stimulate and assist with establishment of in-service training programs for both professional and auxiliary nursing staff.

In 1961 a nursing department was created within the School of Public Health of the Central University. Since its inception three one-month courses in administration and teaching were given to seventeen nurses who occupy senior posts in nursing education and public health nursing. Three fellowships were awarded to prepare faculty. Within the year it is planned to start a full academic year course in administration and teaching and gradually to establish courses in specialties, such as psychiatry and maternal and child health.

Provision is made for a nurse educator and fellowships and in 1964 for short-term consultants in nursing education.

##### VENEZUELA-15, Health Aspects of Radiation (See page 148)

As described more extensively in project AMRO-142 the problems of nuclear energy are of immediate urgency in many countries. Venezuela has been in the forefront of studies in this field and has special interest in establishing security measures for all radiation sources, which have not heretofore been subject to careful control.

Fellowships are provided for the purpose of training national technicians in the health aspects of nuclear energy in 1962 and 1963 and a short-term consultant for 1964.

##### VENEZUELA-16, Aedes aegypti Eradication (See page 148)

The activities of the eradication campaign continued vigorously during the first semester of 1961 but slackened off somewhat during the second semester owing to a reduction in the national budget, precisely when total coverage of the two large cities of Maracaibo and Barquisimeto, both of which are highly infested, was beginning. Thus only Barquisimeto received total treatment; the treatment of Maracaibo will not be completed until early 1962.

During 1962 the campaign will achieve the level of activity foreseen for the previous year since required budgetary allocations are expected to be made. Survey and treatment activities will be completed in the States of Trujillo and Lara and they will continue or start in the states of Zulia, Falcon, and Anzoategui. The campaign will continue through 1963 and the elimination of Aedes aegypti from Venezuela is expected to be achieved by mid-1964. Thereafter, the campaign will be limited to verification activities for purposes of official declaration of eradication and of surveillance of international ports and airports.

Provision is made for one medical officer and two inspectors in 1962 and 1963, and for one medical officer and one sanitarian in 1964.

VENEZUELA-17, Medical Education (See page 148)

At present there are six medical schools attached to five universities in Venezuela. The National Council of Universities establishes and coordinates the curricula and teaching methods as well as all aspects relating to the developments of plans in this field.

For the purpose of analyzing these problems and finding solutions to them it was deemed advisable to make a survey of medical education in the country, the results of which would be submitted to the schools so as to serve as a basis for the preparation of future teaching programs.

In the past the Organization has collaborated with these schools through short-term consultants and the organization of a seminar for deans and professors of the medical schools and representatives of the Ministry of Health and Social Welfare and of the medical associations. Matters related to the curriculum, entrance requirements, places, and other basically important questions were discussed, and recommendations forwarded to the National Council.

It is planned to conduct the survey mentioned above in 1962 with the collaboration of the Organization. The pertinent report will be one of the items on the agenda of the II Seminar on Medical Education which is to be held in cooperation with the Organization in 1963.

Provision is made in 1962 for one medical educator to cooperate in the survey and in the organization of the seminar. Short-term consultants will cooperate in the application of the recommendations and decisions resulting from the survey. Provision is also made for fellowships.

VENEZUELA-18, National Institute of Hygiene (See page 148)

Together with the Division of Laboratories and the National Pathological Anatomy Service, the National Institute of Hygiene forms a department of the Ministry of Health and Social Welfare and its functions are integrated with those of the other branches of the Ministry.

The Institute conducts research, and is responsible for the control, inspection, and the preparation of biologicals. It also has a Food, Drugs, and Cosmetics Section. Its animal colony supplies the various sections of the Institute as well as numerous other agencies throughout the country. The Organization provided the services of a consultant for the establishment of this department.

At the present time the greatest support is being given to the Section of Filtrable Viruses, which is engaged in the production of rabies vaccine, the isolation of respiratory viruses, the diagnosis of smallpox and alastrim, the identification of poliovirus, and the preparation of virus antigens for poliovirus types I, II, and III. The Section is also investigating the role of enteric viruses in diarrheas and gastro-enteritis, in addition to the etiology of these diseases due to bacteria and parasites.

A lyophilization service was recently established for the conservation of strains of bacteria, virus, toxins, sera, reference standards, etc., and for the preparation of lyophilized vaccines.

In 1962 the Organization will provide the services of a short-term consultant in tissue cultures, and fellowships. For subsequent years provision is made for consultants on other aspects of the Institute's activities, as well as the award of some fellowships.

VENEZUELA-19, School of Public Health (See page 150)

At the Central University of Venezuela, the School of Public Health serves as the post-graduate school of the School of Medicine. It has the following functions: to conduct post-graduate courses in public health; to organize and supervise post-graduate courses in the various specialties of medicine and nursing; to cooperate in the teaching of preventive medicine at medical schools; and to supervise the courses for auxiliaries organized by the Ministry of Health and Social Welfare.

The limited number of full-time professors at the School does not meet the needs. The demand for more trained professional staff at the various levels emphasizes the urgent need for improving the curricula and expanding the teaching staff of the institution.

For the purpose of resolving these problems, the Government has requested the collaboration of the Organization in strengthening the curricula through a long-term program which includes: (a) improved teaching methods to obtain increased benefits from training given; (b) increased full-time specialized teaching staff; (c) periodic evaluation of the curricula with a view to making them more practical and dynamic; and (d) intensified surveys and expansion of advisory and cooperative activities.

The program will be developed in a series of two-year stages, a special aspect being covered in each stage.

Upon recommendation of the PAHO Regional Adviser in Health Education, and in accordance with the order of priorities established by the School, a specialist in health education, who will assist in organizing the course on this subject, train the local staff responsible for teaching, and, in cooperation with the other agencies, develop field practice for students, and recommend candidates for training abroad, will be provided in the first stage.

Provision is made for a health educator and for fellowships.

VENEZUELA-20, Public Health Aspects of Accident Prevention (See page 150)

One of the leading causes of death and invalidism is accidents, particularly traffic accidents in big cities and main roads. Some epidemiological studies have been made and a consultant from the United States Public Health Service visited the country in 1959 to survey the situation and to advise on possible solutions. A section in charge of prevention of accidents is to be created in the Ministry of Health.

Provision is made for fellowships in 1962 to observe methods of accident prevention in other countries.

VENEZUELA-24, Consultant Services in Health (See page 150)

It is the purpose of the Ministry of Health and Social Welfare to improve the quality of its local health services as well as their performance in relation to the investments made by the Government in this regard. These services are available to 7,524,000 inhabitants in the country and are distributed in four health zones that include 52 health units, 64 hospitals, 16 health centers, and 436 rural dispensaries.



To this end, the Ministry requested the cooperation of the Organization in conducting an evaluation of its services. It was made in 1960 by three consultants in the health areas of Yaracuy and in the health units of Merida and Ciudad Bolivar. The consultants' conclusions on the organization, activities, available resources, and existing problems of these services, together with their general recommendations, were transmitted by the Organization to the health authorities of the country. In 1962 advisory services will be provided on the methods to be used in implementing those recommendations and, if possible, in drawing up a long-term plan.

Provision is made for the services of short-term consultants.

VENEZUELA-27, Promotion of Community Water Supplies  
(See page 150)

The aim of this project is to assist the Government in studying sound business methods for urban water systems as well as in finding methods for financing new systems or for improving or extending existing ones.

Accordingly, a short-term consultant was provided in 1960 to recommend approaches to immediate and long-range problems faced by the National Institute of Sanitary Works. On the basis of these recommendations, further consultation services were provided in 1961 in planning, financing, study of water rates, operating records and statistics, public information policies, and studies on the feasibility of certain municipal systems.

Assistance was provided in the preparation of applications for loans for the following: (a) the construction of 55 aqueducts for cities of from 5,000 to 12,000 inhabitants, for which the Inter-American Development Bank approved a loan for \$10,000,000 and the Government provided \$15,000,000, through the National Institute of Sanitary Works; (b) the construction of 336 aqueducts for communities with less than 5,000 inhabitants, for which IADB lent the sum of \$10,000,000 and the Government an equal amount; and (c) improvement of water supply in the city of Maracaibo, still being negotiated. A request for a loan of \$6,000,000 has been made to the Inter American Development Bank.

Provision is made for short-term consultants and, beginning in 1963, one sanitary engineer.

VENEZUELA-28, Industrial Hygiene (See page 150)

Venezuela is in full process of industrialization and problems in industrial hygiene are increasing rapidly. The Ministry of Health and Welfare has already created a Department of Occupational Health with regional branches covering the whole of the country.

Increase in the indiscriminate use of insecticides in agriculture and related industries is creating a public health problem. In order to collaborate in this industrial hygiene program provision is made for fellowships.

VENEZUELA-29, Planning and Organization of Hospital Services (See page 150)

The Ministry of Health and Social Welfare proposes to intensify and improve the organization of medical care

services in the country, and to determine their effectiveness in relation to the increasing investments made in this field.

The Ministry at present has 64 hospital establishments with a capacity of 15,252 beds. Medical care services are also provided in 52 health units, 16 health centers, and 436 rural dispensaries.

For the purposes stated, the Organization has been requested to cooperate in a project with the following objectives: (a) the continuation of the study on the status and problems of medical care in the country; the present organization of hospital services and their operation, expenditures, and performance; their integration with the remaining health program; and their coordination with the other semi-autonomous and private hospitals in the country; (b) the preparation and development of a medical care plan integrated with the remaining public health activities, including the technical reorganization and improvement of hospital services in the country; (c) the administrative and functional reorganization of one or more hospitals to be used for demonstration and training; (d) personnel training in methods and procedures of hospital organization and administration.

It is expected to complete the preliminary survey in 1962 with the assistance of a consultant of the Organization, and to use it as a basis for programming the activities for future years.

Provision is made for a medical officer in 1963 and 1964, and for fellowships for specialization in this field.

VENEZUELA-35, Rural Water Supplies (See page 152)

The provision of water supply for cities with more than 5,000 inhabitants in Venezuela is the responsibility of the National Institute of Sanitary Works, and for localities with less than 5,000 population, that of the Ministry of Health and Social Welfare. The latter has been engaged in this task for the past 15 years (since 1945) and has constructed 177 rural aqueducts which supply 1,250,000 persons living in 190 localities.

This program is financed with funds from the Government and a loan from the Inter-American Development Bank. With these funds it is expected to construct 336 aqueducts for localities of up to 5,000 inhabitants in the next two years. When completed, they will be turned over to the respective municipalities for operation, administration, and maintenance.

The aim is to provide assistance to the program in general, with emphasis on the adoption of administrative standards conducive to the efficient operation and maintenance of these services. A more active community participation is also sought.

Provision is made for one sanitary engineer.

VENEZUELA-36, Leprosy (See page 152)

Short-term consultants are provided in 1962 to advise on the organization of programs of leprosy control, with particular attention to rehabilitation.

VENEZUELA-37, Rehabilitation (See page 152)

The prevention of deformities and invalidism of various etiologies - accidents, leprosy, poliomyelitis -

as well as the rehabilitation of such patients is a matter of great concern to the health authorities of Venezuela, and one to which they are at present devoting a large part of their efforts, initially through the Leprosy Division of the Ministry of Health and Social Welfare. However, the intent is to develop a national program that will cover every aspect of rehabilitation and coordinate all the activities in that regard that are now dispersed.

It is proposed to establish a National Rehabilitation Center and to hold a national seminar on these problems in 1963. The Bureau's advisory services have been requested for this purpose.

Provision is made in 1963 for a consultant in rehabilitation to evaluate the situation and advise on the organization of the work. Advisory services will also be provided in the preparation and holding of the above-mentioned seminar. Provision is also made for one fellowship in 1964.

#### VENEZUELA-38, Rural Housing (See page 152)

In Venezuela the morbidity rates in the population under 10 years of age are twice as high in the rural as in the urban areas. The most frequent causes, as recorded in the rural dispensaries, are the common cold, the helminthic diseases, and diarrheas and malnutrition, attributable to socio-economic factors and to poor environmental sanitation conditions, such as scarcity and poor quality of water, improper disposal of feces, etc. These diseases are the beginning of other diseases that cause death such as the pneumonias (fourth place among causes of death) or gastro-enteric diseases (first place in rural areas and third place in the country). The anemias and malnutrition are also the cause of mental backwardness.

Two basic aspects, the cultural and the technical, must be taken into account in a rural housing project if it is intended to achieve sanitary, safe, lasting, economical, and well located housing.

The present four-year rural housing plan of the Government makes provision for 6,550 dwellings in 1961-1962, 10,000 in the period 1962-1963, and 12,000 in 1963-1964. It is expected that a similar number of dwellings will be constructed in 1964 without the need for credits.

For Venezuela it will be necessary to determine the maximum size of a lot for a worker's family, as well as the location of new villages to be established, type of construction, means of communication, and so forth. Such villages would put an end to the dispersion of the rural population and would provide every aspect of sanitation, including aqueducts and sewerage systems and other services such as schools, recreational centers, telephones, etc.

The layout of this type of community has already been initiated in some areas of Venezuela through the Ministry of Health's Section of Rural Housing, but a duly planned program is lacking.

Provision is made for a housing expert in 1964, as well as for fellowships for the observation of works of this kind.

#### VENEZUELA-39, Pneumonias (See page 152)

In Venezuela the mortality rate due to pneumonias has been steadily increasing for the past ten years and now occupies fourth place among the causes of death. The highest figures are recorded among the rural population and 85 per cent of the deaths occur in children under 5 years of age.

The Ministry of Health and Social Welfare has requested the assistance of the Organization in making an epidemiological survey of pneumonia cases and deaths, including the clinical, nutritional, bacteriological, and anatomic-pathological aspects, and in recommending standards for diagnosis and treatment as well as control measures to reduce the incidence of these diseases.

Provision is made for a short-term consultant in 1964.

#### INTERCOUNTRY PROGRAMS

##### AMRO-8, *Aedes aegypti* Eradication (Caribbean) (See page 152)

As early as 1947 the countries of the Americas went on record as recognizing the common danger of the continued existence of the urban vector of yellow fever, *A. aegypti*, in many parts of the Hemisphere. That year the Directing Council directed the Organization to undertake the task of stimulating and coordinating *A. aegypti* eradication throughout the Americas. In the years since, sixteen countries and territories, at considerable cost and sacrifice, have achieved eradication of *A. aegypti*. The principal remaining foci are the southeast of the United States of America and some countries and territories of the Caribbean. The continued presence of these foci poses two hazards: infested countries run the risk of yellow fever epidemics should the yellow fever virus be introduced into the population, and, secondly, the infested countries' neighbors, though themselves free of *A. aegypti*, are in constant danger of reinfestation as the mosquito can be introduced into a country by air, sea, or land travel.

Under this regional project one medical officer provides advisory services on the eradication of *Aedes aegypti* to the health authorities of the British, French, and Dutch areas in the Caribbean and gives technical assistance and supervision to the Organization's consultants assigned to other country projects in the Caribbean. In addition, limited supplies and equipment are provided.

##### AMRO-47, Yaws Eradication and Venereal Disease Control (Caribbean) (See page 154)

Except for the endemic areas in British Guiana, all territories with a high prevalence of yaws (St. Christopher, Nevis, Anguilla, Grenada, St. Vincent, Virgin Islands, Dominica, St. Lucia, Trinidad, and Tobago) have had mass treatment programs for eradication of yaws since the beginning of this program. Grenada, St. Vincent, St. Lucia and Dominica, however, still reported cases in 1961.

A survey has been completed in British Guiana and a plan of operations for yaws eradication prepared. The program is to begin in 1962 with UNICEF collaborating by providing supplies and equipment. The precise situation in Surinam is not known but it is expected that the

Government will authorize an initial survey in 1962. Jamaica still registers active cases of yaws annually.

The consultant assigned to this project also gives technical advice in venereal disease control to the territories in this area. This mission has been completed in Curacao, and has begun in Jamaica.

Provision is made for the services of a medical officer.

AMRO-95, Environmental Sanitation (Caribbean)  
(See page 154)

Major public health problems in the Caribbean area are related to diseases that can be prevented largely by better environmental sanitation. Under this project expanded programs in the islands are giving special attention to the survey and evaluation of environmental sanitation conditions and to their improvement. Emphasis is placed on the development of strong environmental sanitation services responsible for the promotion and provision of water supply systems, sewage and excreta disposal, garbage and refuse disposal, milk and food sanitation, school sanitation, and other sanitation activities of major importance, through the gradual implementation of projects after surveys in each territory.

Since 1955 surveys have been made of sanitary conditions in eleven areas. With UNICEF support projects have been implemented in Trinidad, Barbados, St. Lucia, St. Vincent, Grenada, St. Kitts, and British Guiana. Projects are pending in three other areas in which surveys have been completed.

Provision is made for the services of one sanitary engineer and two sanitarians. An additional sanitarian has been provided beginning in 1963.

AMRO-117, Malaria Technical Advisory Services (Zone I)  
(See page 154)

This project provides for a Zone Advisory Team for all the malaria projects in the Caribbean. The main duties of the team are to advise and assist international personnel assigned to country projects in the specialized fields, to provide advisory services to the widely scattered islands, each too small to require full-time international personnel, and to assess and review the progress of work of all the malaria projects in the Caribbean.

In addition, this project makes it possible to provide a more direct and intensive supervision over the work carried out by the international personnel assigned to the different countries and also to provide closer coordination of work among the anti-malaria projects. The team also operates a central laboratory which provides the service of re-checking malaria slides.

The team is composed of one Chief Zone Malaria Advisor, one epidemiologist, one entomologist (1962), one laboratory adviser, and one secretary. They are stationed in various countries where the respective services are needed most.

Provision is made for continuing the services of these personnel, and for the necessary supplies, equipment, and common services.

AMRO-134, Training Center for Malaria Eradication (Kingston)  
(See page 156)

This training center was established in cooperation with the Government of Jamaica and with the Agency for International Development of the United States of America as an important part of the malaria eradication training plan for both national and international personnel.

Courses are organized annually, according to need, for senior staff (physicians, engineers, entomologists) of malaria eradication programs and also for sanitarians. The available facilities make it possible to train some 25 persons in each course. From 1958 to the end of 1961 a total of 259 physicians, engineers, entomologists, sanitarians, and health educators have been trained.

AID provides the services of the entomologist (Deputy Director), one sanitarian, and a part of the transport and vehicle maintenance services.

The Ministry of Public Health of Jamaica provides the laboratory premises and installations at the Institute of Public Health Training of the West Indies.

Provision is made for a director of the training center, one sanitarian, one administrative officer, three secretaries, and one janitor-messenger, for visiting professors in the various disciplines, and for supplies, equipment, and common services.

AMRO-157, Health Statistics (Zone I) (See page 156)

The functions of the statistical consultant proposed for the countries of Zone I are: (a) to give advice and assistance to countries for the improvement of vital and health statistics, with special emphasis on notifiable disease statistics, on development of health statistics in accordance with recommended standards, and on use of the data in program planning; (b) to give courses in statistics and to assist in the selection and follow-up of fellowship students and in the development of seminars, workshops, and other training activities in statistics; and (c) to advise on statistical aspects of projects and assist in the compilation and analysis of information for program planning.

A statistician was assigned to these functions in November 1959 with duty station in Jamaica.

Provision is made for the continuation of the services of a statistician.

AMRO-204, Sanitary Engineering (Zone I) (See page 156)

The Zone Sanitary Engineer will assist with the following activities in all countries of the Zone: coordination of the work of the Organization's engineers stationed in country projects; advice to governments on matters relating to technical, financial, and administrative aspects of water supply, sewage and industrial waste disposal, garbage and refuse disposal, food and milk sanitation, air pollution, vector control, industrial hygiene and the sanitary aspects of housing. The engineer will be available to cooperate with governments in the development and submission of projects to various financing agencies, and will assist, as requested, in all phases of such projects; will also undertake special studies and collect such information as will facilitate interchange of technical data between countries.

The training of sanitary engineers and sanitarians, and the strengthening of environmental sanitation services in Ministries of Health, will be major areas of service to countries.

Provision is made for fellowships, one sanitary engineer, and one secretary, beginning in 1963.

AMRO-245, Training Course on Nursing Supervision and Administration (Zone I) (See page 158)

In all the countries within the Zone there is need for more nurses with training in administration and supervision in both the hospital and public health services. In some hospitals there is only one supervisory staff to 22 staff nurses; in the public health nursing services the range is variable but is as low as one supervisor to 66 staff. Many of these nurses have had no training to prepare them to carry out their responsibilities of administration and supervision but have been put in these posts because of seniority.

In 1962, sixty English-speaking nurses in senior positions will attend short courses of six weeks' duration in an effort to meet partially the pressing need for training.

Provision is made in 1962 for short-term consultant services, for fellowships, and for supplies and equipment.

AMRO-269, Nutrition Advisory Services (Zone I)  
(See page 158)

The purpose of this project is to assist countries of Zone I (a) to collect information on nutritional problems and to assess needs; (b) to plan short-term and long-term national nutrition programs in close cooperation with FAO and with UNICEF, giving particular attention to the integration of nutrition programs into public health services at all levels; (c) to plan and organize health education programs in nutrition, adapted to local conditions; (d) to collaborate with FAO and UNICEF in programs for the production of protein-rich foods other than milk, especially for expectant and nursing mothers and for children; (e) to evaluate nutrition projects; and (f) to organize courses, seminars, and other training activities.

A nutrition adviser was appointed in 1961 and has participated in a survey of nutritional conditions in several territories. Promotion of local protein-rich vegetable foods is an important feature of the work.

Provision is made for continuing the services of the nutrition adviser.

AMRO-289, Nursing (Zone I)  
(See page 158)

The Zone Nurse Adviser assists with the following activities in all countries of the Zone: technical guidance of nurses stationed in country projects; cooperation with national departments of health to determine nursing and midwifery needs and resources; planning programs for public health and hospital nursing, midwifery services, and nursing education; developing these professions in order that they may provide optimum services adapted to changing health needs; and evaluating nursing and midwifery programs.

The Nurse Adviser will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

Major areas of services to Ministries of Health will be strengthening of nursing and midwifery services and training of personnel for these services.

Provision is made for one nurse and one secretary beginning in 1963.

AMRO-312, Rabies Control (Zone I) (See page 158)

Rabies is a serious problem in Zone I where 7 human cases were reported in Venezuela in 1961. In British Guiana there has also been an undetermined number of cases. The Organization has been requested to provide assistance here and also in Trinidad and Grenada. Cases of rabies in cattle have been reported in French Guiana.

Provision is made in 1964 for a short-term consultant and for fellowships.

AMRO-324, Planning (Zone I) (See page 158)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises governments on request on the preparation and execution of national health plans as components of national plans for social and economic development. Consultants will also render advisory services to the governments on the organization of planning units within Ministries of Health.

Upon requests by governments, orientation courses in the principles and techniques of planning will be developed for personnel of national health services in the respective countries.

Provision is made in 1964 for short-term consultants and fellowships.

## PART III

## ZONE II

Zone Office (See page 160)

For text see "Zone Offices," page 39.

CUBACUBA-1, Aedes aegypti Eradication (See page 160)

With the single exception of the Sierra Maestra, the entire territory of the Republic of Cuba is infested with Aedes aegypti.

Prior to 1959 the campaign was developed in a very limited way in the most infested sectors of Havana, but, owing to lack of funds, it was not possible to achieve total coverage cycles in accordance with the standards adopted by the Organization.

During 1959, a new phase was started in this campaign, beginning with three-month cycles of total coverage in Greater Havana. In 1962 it is expected to complete the work in this province and to extend the campaign to the neighboring provinces of Pinar del Rio and Matanzas. The initial verification carried out in areas in the province of Havana has given fully satisfactory results.

Provision is made for a medical officer and two sanitarians, as well as for supplies and equipment.

CUBA-3, Public Health Services (See page 160)

This project represents WHO/PAHO assistance to Cuba in the organization of health services. It began with advice to the National Health Service and to a project in Pinar del Rio in 1959. In 1962 international advisory services will be concentrated in a demonstration and training area near Havana. A medical officer, a sanitary engineer and two public health nurses are assigned to cooperate in the demonstration.

Fellowships have also been provided for training of national personnel.

CUBA-4, Nursing Education (See page 162)

A new school of nursing, operated according to modern standards and adapted to the country's needs and resources, was opened in October 1960 with 54 students. In January 1962 the second group of about 100 students was admitted and the number of instructors increased. Students receive their clinical experience in the adjacent, newly opened 400-bed National Hospital and in other institutions. Nurses completing the three year course will be qualified to work in all health services. Four other schools are modernizing their curricula beginning in 1962. In addition, special six-month courses for preparation of nursing instructors are given in Cuba.

Provision is made for an advisor in nursing education to continue collaboration in this project. Two posts are to be discontinued in 1963.

CUBA-5, Malaria Eradication (See page 162)

The Government, with the collaboration of the Organization, has conducted an epidemiological survey to determine the extent and the characteristics of the malarious area of the country. Work on the establishment of a system for reporting fever cases is continuing, as are entomological investigations.

The preparatory phase of the malaria eradication was completed in 1961, including the geographical reconnaissance of Oriente Province and part of Camaguey Province and the training of spraying personnel. Total coverage is scheduled to start during the first half of 1962.

Provision is made for a malariologist, a sanitary engineer, two sanitarians, and an entomologist, as well as for fellowships and antimalarial drugs.

CUBA-6 (PAHO), CUBA-200 (WHO), Fellowships for Health Services (See page 162)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its public health services.

CUBA-14, Refuse Disposal (See page 162)

Provision was made in 1961 for a short-term consultant to advise the Government of Cuba in establishing the necessary facilities for proper disposal of refuse from Havana and adjacent zones. Fellowships are being provided in 1962.

DOMINICAN REPUBLICDOMINICAN REPUBLIC-2, Malaria Eradication (See page 164)

In 1959, after the first year of total coverage with dieldrin was completed, the principal malaria vector showed resistance to this insecticide, and a switch was made to DDT after vector susceptibility to this insecticide was verified in the localities tested. DDT-sprays are being applied in nine-month cycles.

UNICEF is providing insecticides, vehicles, and other supplies and equipment.

In 1960 and 1961 both epidemiological evaluation and spraying were severely handicapped by the shortage of funds. Total coverage with DDT will be made in 1962. The attack phase of the campaign should continue until 1965.

Provision is made for continuing to provide advisory technical services with one medical officer, one sanitary engineer, and three sanitarians, as well as for antimalarial drugs and fellowships.

DOMINICAN REPUBLIC-3, Nursing Education (See page 164)

In August 1958 a nursing school was established in the Dominican Republic. This school is the culmination of many years of planning and is the only school of its kind in the country. A director, an assistant director, and seven instructors have been appointed, and a training program based on modern principles and methods is being followed. The first group of nurses graduated in January 1962 and were qualified to work in all public health service. The Dominican Social Security Fund is cooperating by granting fellowships, and UNICEF has approved the award of stipends for student nurses. In 1961 the school obtained a building suitable for its activities.

Provision is again made for a nurse educator, fellowships, and supplies and equipment. A second nurse educator will be assigned in 1963.

DOMINICAN REPUBLIC-4, Public Health Services  
(See page 164)

The objective of this project is the re-organization of the health services at the national level and the progressive organization of services, including both health centers and hospital facilities, at the provincial and the district levels. UNICEF is providing supplies and equipment for maternal and child health services in rural areas as well as for the expansion of rural sanitarian activities. The project is now being extended from the capital city and San Cristobal to cover the entire country and more emphasis is to be given to the provision of adequate water supplies, the improvement of the public health laboratory services, the expansion of public health nursing, and the elaboration of long-range plans for the improvement of health education at all levels.

Provision is made for one chief country advisor, one sanitary engineer, and one public health nurse. One health educator and one public health laboratory advisor will be added to the team in 1963. Provision is also made for limited amounts of supplies and equipment.

DOMINICAN REPUBLIC-8, Aedes aegypti Eradication  
(See page 166)

Aedes aegypti is the vector for urban yellow fever. Eradication of the vector will eliminate this disease from cities and will reduce the danger of transmitting the yellow fever virus between countries. Since 1947 the Organization has devoted concentrated efforts toward eradication of the vector from the Western Hemisphere.

In 1952, the Aedes aegypti infestation index in the Dominican Republic was very high. This index has been greatly reduced for the country's inland infested areas, to which the intradomiciliary spraying of the malaria eradication campaign has contributed to a great extent. At present there are numerous localities in the interior of the country with a zero index.

Scarcity of funds has delayed the activities of this program. The Government has, however, decided to provide more resources and in 1962 a new plan of operations was put into execution under which an increase in personnel and administrative facilities will permit intensification of the campaign in the capital.

Provision is made for the continuation of the services of a medical officer and a sanitarian.

DOMINICAN REPUBLIC-10, Tuberculosis Control  
(No budgetary provision - advice of regular staff only)

Following a mass BCG vaccination campaign undertaken with the cooperation of the Organization and UNICEF from October 1958 to August 1961, a pilot area tuberculosis control project is planned to start in 1963. It will be organized in the San Cristobal health district. Training of the necessary professional and auxiliary health personnel will begin in 1962.

The aim of the project is to investigate the prevalence of tuberculosis and to develop simple, inexpensive and collective control methods that can be applied under local circumstances. The long-term objective will be to extend tuberculosis control activities to other areas of the country as part of the general public health program.

It is anticipated that UNICEF will provide the necessary supplies and equipment.

The Organization will provide consultant services from the team now assigned to the integrated health project (Dominican Republic-4). In addition, the services of the regional adviser in tuberculosis will be available as required.

DOMINICAN REPUBLIC-11, PAHO Fellowships for Health Services (See page 166)

Provision is made for fellowships in order to assist the Government in the training of staff for the progressive expansion and improvement of its health services.

DOMINICAN REPUBLIC-15, Promotion of Community Water Supplies (See page 166)

In 1959 a National Interministerial Commission was created to study the integration of the various aspects of providing potable water for the urban population of the country. In 1961, A Division of Water Supply and Sewage Disposal to be in charge of design and construction was organized within the Ministry of Agriculture. Under consideration now is the creation of an autonomous agency to be in charge of design, operation and administration of water supply and sewage systems of the country.

Provision is made in 1963 and 1964 for a sanitary engineer and for short-term consultants to collaborate in the formulation and development of a national plan of improvement and construction of water and sewage systems. In addition, limited supplies are to be made available to the project.

DOMINICAN REPUBLIC-16, Veterinary Medical Education  
(See page 166)

The Secretary of Health and Social Welfare has recently organized its veterinary services and now requires well-trained personnel to assume responsibility

for stimulating the production of safe food products of good quality and for controlling the zoonoses that impede economic development. The Government does not have personnel with sufficient experience to assume this double responsibility. The number of veterinarians in the country is very limited, and it is necessary to increase the number of trainee veterinarians and to emphasize preventive medicine and public health in school curriculum.

Provision is made for a consultant in veterinary education, especially its public health aspects, to cooperate with the director of the school of veterinary medicine in the development of an improved academic program, in the organization of the school by departments, and in improvement of the faculty of the school. Services of this consultant are to begin in 1963.

#### DOMINICAN REPUBLIC-52, Yaws Eradication (See page 166)

This project has progressed normally and the number of infectious yaws cases has been appreciably reduced. A special survey was made in mid-1962 to determine the progress achieved and the present incidence of yaws in the country.

Special courses were given to physicians and laboratory technicians in order to expand venereal disease control services on a regional basis.

To intensify activities during the consolidation phase of the yaws eradication program, the personnel and equipment will also be used for house-to-house case-finding activities and a smallpox vaccination campaign will serve as a means of more direct contact with the population in conjunction with these activities.

Provision is made for the continuation of a medical officer. The serologist is to be transferred to project Dominican Republic-4 in 1963 to give technical advisory services in organizing public health laboratories.

### HAITI

#### HAITI-1, Yaws Eradication (See page 168)

This project, which is being carried out with the participation of UNICEF, has made it possible to reduce yaws incidence in Haiti from 4,000 cases per 100,000 population in 1950 to only 6.3 per 100,000. In 1961 it was possible to verify microscopically only 33 of the 271 clinical cases. Except for only four or five isolated areas still having residual cases, yaws may be considered to be eradicated from the country.

The consolidation and surveillance phase will continue during 1963 and in order to achieve a more direct contact with the rural population inspectors will give smallpox vaccination in homes in the areas identified as residual foci. Thus yaws surveillance and a smallpox campaign will be combined and gradually incorporated into the general public health services.

Provision is made for one medical officer and one sanitary inspector, as well as for the acquisition of vehicles in 1963.

#### HAITI-4, Malaria Eradication (See page 168)

Of the total territorial area of 27,750 km.<sup>2</sup>, 19,000 km.<sup>2</sup> constitute the malarious area. The population at risk is estimated at 3,352,398, and approximately 900,000 houses require spraying annually. The first cycle was inaugurated in 1958. At the request of the Government, the campaign was interrupted at the end of the same year for financial reasons. However, PAHO continued to make advisory services available for resuming the campaign.

The campaign was resumed in 1961 with the cooperation of AID, UNICEF, and PAHO, and geographical reconnaissance was completed during the same year. Total coverage will begin in 1962 and it is estimated that it will continue until 1965.

Provision is made for a chief malaria adviser, an epidemiologist, a sanitary engineer, a health educator, and three sanitarians, as well as for antimalarial drugs, fellowships, and common services. In 1963, another sanitarian will be added.

#### HAITI-9, Public Health Laboratory (See page 168)

The reorganization of public health laboratory activities, which is the result of personnel training, has made it possible to expand diagnostic and epidemiological services in the country. The continuation of this project will make it possible to organize food control and water control laboratories and the training of the necessary personnel.

Provision is made for a consultant on laboratory services and for supplies and equipment.

#### HAITI-12, PAHO Fellowships for Health Services (See page 168)

Provision is made for fellowships in order to assist the Government in the training of staff for the improvement and expansion of its health services.

#### HAITI-16, National Health Services (See page 170)

Since 1958 a consultant has been advising the Government in all matters connected with public health in general and with the development of the country's public health services. A draft tripartite plan of operations provides the organization of health centers and a suitable number of sub-centers in the towns of Archaie, Croix-des-Souquets, and Thomazeau. It is envisaged that integrated health services of the type projected for this initial area can later be extended throughout the entire country.

UNICEF and AID also cooperate in this project.

Provision is made for one chief adviser, one medical officer, one sanitary engineer, one public health nurse and one health educator. In addition, provision is made in 1963 and 1964 for limited amounts of supplies and equipment and for fellowships.

HAITI-19, Medical Education (See page 170)

Since 1957 efforts have been proceeding in the reorganization of the curriculum, the modernization of teaching methods, and the strengthening of the faculty of the medical school in Haiti. For this purpose, the Organization has provided a professor of physiology.

Progress achieved during 1961 in further strengthening of the institution was considerable despite difficulties. The construction of laboratory facilities in physiology was completed, equipment purchased by AID for this purpose was installed, and an animal house was built. Essential text-books for first year and third year students were provided with assistance from the CARE organization. Teaching methods were improved with the introduction of a number of seminars and discussion groups.

Owing to special circumstances prevailing in the country certain supplies and equipment are made available by the Organization in order to assure at least a minimum of continued satisfactory development in those aspects of the work which have been mentioned above. Fellowships are also awarded for academic study on the part of persons who will later become professors.

Provision is made in 1962 and 1963 for a professor of physiology for teaching supplies and equipment, and for fellowships.

HAITI-20, Nutrition (See page 170)

A joint survey of needs and resources in nutrition was made in 1960 by PAHO/WHO and FAO. The survey revealed the need to establish an interdepartmental coordinating agency, i.e., a National Food and Nutrition Service, whose membership would include the Ministries of Public Health, of Education, and of Agriculture.

Beginning at the end of 1961 advisory services to the Government in this field were strengthened by the assignment of a nutrition consultant on a fulltime basis and supplies are being made available. In addition, fellowships are provided in 1964.

Provision is made for a nutrition consultant as well as for necessary duty travel in 1963 and 1964 and for fellowships in 1964.

HAITI-22, Promotion of Community Water Supplies (See page 170)

In 1960 and 1961 training was provided for national engineers in both administration and financing and in the design and operation of water supply and sewage systems. At the same time, the Government, with the assistance of the Organization, prepared a preliminary plan to finance the construction of works for the improvement of water supply services in Port-au-Prince, which it submitted to the Inter-American Development Bank.

For this purpose, three sanitary engineers were assigned to Haiti for three months.

To continue these activities, provision is made for one sanitary engineer and for short-term consultants to assist in the work of training and in

the implementation of a new management structure as well as in the improvement of water supply services in the country.

MEXICOMEXICO-14, Nursing Education (See page 172)

The objective of this project is to promote the development of basic nursing education through direct consultation services and sponsoring of seminars of directors of school of nursing in cooperation with the Ministry of Health which gives assistance to Schools of Nursing that meet certain standards. A course for instructors was held in 1959 and 1960, and a seminar in 1961. It is expected that the course for instructors will again be given in 1962 and repeated yearly. Cooperation is also given to a country-wide, training program of auxiliary nursing personnel.

Beginning in 1962 UNICEF will provide fellowships for four selected Schools of Nursing as well as for some instructors.

Plans are being made to initiate a survey of nursing needs and resources.

Provision is made for one nurse educator, a second nurse educator in 1964, fellowships and supplies and equipment.

MEXICO-15, State Health Services (See page 172)

Originally intended to strengthen maternal and child health services in seven states of Mexico, this project has been progressively expanded until it is now operating in nine states as an endeavor to cooperate in the development of integrated health services for all the areas covered by the operations, including the former integrated health project in the State of Guanajuato.

In 1960, activities were begun in the States of Yucatan and Tlaxcala, where the health administration was reorganized and health services, formerly dispersed, were integrated. Collaboration was given in the preparation of nursing auxiliary personnel in Yucatan through short courses and through direct consultation with professional nursing staff. In addition, cooperation was given in a six-month course in public health nursing for graduate nurses in key positions who could not take a full course at the School of Public Health.

Expansion of the project is anticipated owing to expected extensive operations in environmental sanitation both in the area of the Federal District and in ten other states. Some of these were not foreseen in the present plan of operations.

Supplies and equipment are being provided by UNICEF.

Provision is made for one medical officer, one sanitary engineer, two public health nurses, one sanitarian, and one health educator. In addition, provision is made for limited amounts of supplies and equipment and for fellowships.



MEXICO-23, Nutrition (See page 172)

The aim of this project is to cooperate with the Government in its activities to improve the nutritional status of the population.

During the past three years nutritional and dietary surveys were made in several areas of the country in order to determine the magnitude and nature of the problems. In addition, pilot programs in some rural areas were established and the national nutritional services were strengthened through a training program. It is anticipated that early in 1962 a directorate of nutrition will be established in the Ministry of Public Health.

Provision is made for fellowships and for training of nutrition personnel at various levels of government.

MEXICO-25, PAHO Fellowships for Health Services (See page 172)

Provision is made for fellowships in order to collaborate with the Government in training staff for the improvement and expansion of the public health services.

MEXICO-26, Aedes aegypti Eradication (See page 172)

During 1959 and 1960 the *Aedes aegypti* eradication campaign was carried out in Mexico by national teams. At the request of the Government, the Organization made a detailed verification in the Gulf of Mexico areas and along the border with Guatemala in the latter part of 1959. The results obtained in the campaign were favorable.

In late 1961, again at the request of the Government, and for the purpose of ascertaining the possibility of declaring *A. aegypti* eradicated in Mexico, the Organization appointed two officials to make a careful check of the areas where activities were continuing and of the areas that were found free of *A. aegypti* in 1959. The activities are expected to be completed in 1963.

Provision is made for two sanitarians in 1962 and 1963.

MEXICO-28, Public Health Laboratory (See page 174)

Through this project cooperation was given in developing personnel training and activities of the National Public Health Laboratory, the National Institute of Hygiene, and the National Institute of Virology.

The need for increasing the production of high potency biologicals for use in national immunization campaigns required the Organization's cooperation in the planning of new laboratories, in developing production, and in training new personnel.

Continued expansion of food control services at the National Public Health Laboratory and increased epidemiological studies at the National Institute of Virology also require the cooperation of the Bureau.

Provision is therefore made for short-term consultants, fellowships for personnel training, and a small amount of supplies and equipment.

MEXICO-29, Leprosy Control (See page 174)

In 1959 the Organization made a survey to determine the extent and severity of the leprosy problem in Mexico. In 1960 a reorganization of the leprosy control project was recommended in order to introduce changes in accordance with the latest scientific advances.

UNICEF participates in this project by furnishing supplies and equipment.

The PASB consultant cooperated in the organization of the Department of Epidemiology of the leprosy control project and in the training of personnel. During 1963 and 1964 the activities aimed at integrating the prevention and control of leprosy into the regular health services will be continued.

Provision is made in 1963 and 1964 for one medical officer and a small amount of supplies.

MEXICO-30, School of Public Health (See page 174)

The aim of this project is to cooperate with the School of Public Health in strengthening and expanding its teaching program.

In previous years visiting professors and a consultant in public health nursing have been provided to the School; travel grants have been awarded to various professors to enable them to observe teaching methods and to study programs in other institutions; and a limited amount of supplies has been furnished.

Provision is made for the continuation of collaboration of this type through short-term consultants and fellowships. In 1963, limited amounts of teaching supplies are also to be provided.

MEXICO-32, Medical Education (See page 174)

In Mexico medical education is developing rapidly due to appointment of full-time professors, reorganization of curricula, modernization of teaching methods, and progressive strengthening of the teaching staff of various medical schools, both in the capital and in the states. Special attention has been given to improving the teaching of preventive medicine.

The Organization has collaborated with the medical schools by providing training abroad for members of the teaching staff, by making travel grants to deans and senior faculty members so that they could visit other schools, and by supplying visiting professors and consultants.

Provision is made for fellowships and short-term consultants.

MEXICO-34, Teaching of Public Health in Schools of Veterinary Medicine (See page 174)

Veterinary public health services at all levels in the health administration of Mexico cannot be attended to owing to a shortage of veterinarians. The same problem exists in the Departments of Agriculture and Livestock.

The reorganization of the School of Veterinary Medicine of the National Autonomous University of Mexico to meet the demands of an increasing school population which exceed present possibilities for training and which find no vacancies in the three State schools that teach the veterinary sciences calls for the cooperation of international agencies to expand and strengthen the teaching and research departments as well as to train the specialized teaching staff.

FAO intends to cooperate in the field of teaching livestock breeding and production. The cooperation of the Organization has been requested for the establishment of a department of preventive medicine and veterinary public health, to enable students to learn the epidemiological methodology that will make it possible to (1) reduce the losses caused to animal production through diseases; (2) control the zoonoses; (3) improve the production of clean and wholesome food through the extension of veterinary hygiene in domestic production, and in all phases of the cattle industry so as to promote the welfare and health of the rural population and to guarantee healthy food to the urban consumer.

Provision is made for a consultant and for fellowships for the training of teaching staff.

#### MEXICO-35, Environmental Sanitation Training (See page 176)

Since 1955 the Organization has been collaborating with the School of Sanitary Engineering of the National Autonomous University of Mexico in conducting postgraduate courses for engineers wishing to specialize in this field. Up to 1961, 73 engineers had been graduated.

In 1961 an international intensive postgraduate course on design and operation of drinking water supply systems was given for 24 engineers in cooperation with the Department of Hydraulic Resources of Mexico.

Provision is made for short-term consultants, supplies, laboratory equipment, reference books, and research. In 1964 provision is made for fellowships.

#### MEXICO-38, Tuberculosis Control (See page 176)

In this project, a study was made in 1961 of the physicians, nurses, and laboratory technicians that needed to be trained and the survey teams to be prepared.

The medical consultant began his activities in September 1961 after completing the draft of the tripartite agreement and cooperating with the national team in setting up standards for the organization and development of tuberculosis programs, establishing chest clinics, etc. He will also provide technical advisory services in the application of control procedures by pneumonological services of the national campaign.

The surveys planned (3 in 1962) will be carried out in accordance with the tripartite agreement; each will last about 4 months and include the examination of between 15,000 and 20,000 persons with the equipment provided by UNICEF.

Provision is made for one medical officer and for fellowships for local staff.

#### MEXICO-39, Promotion of Community Water Supplies (See page 176)

The Organization has been collaborating with the Secretary of Water Resources since 1960 in a national program for construction of new water services and improvement of existing ones.

As a first step, in collaboration with the Water Supply Committee of the city of Monterrey, a study was made for the submittal of a request to the United Nations Special Fund for making the necessary studies in that city. At the same time, in 1960 and 1961, with the cooperation of the Secretary of Water Resources, training was provided for national sanitary engineers in administration, management, and financing of water systems.

The Organization will continue to assist the Secretary of Water Resources in the design and administration of water supply services, as well as in the training of technical and auxiliary personnel.

Provision is made for one sanitary engineer and for short-term consultants.

#### MEXICO-53, Malaria Eradication (See page 176)

Sprays were begun in 1957. Since then the campaign has been vigorously pursued. Large areas of the country have been placed in the surveillance stage in advance of schedule.

As the campaign has proceeded, epidemiological evaluation has been intensified through a case-finding network of volunteer workers. Where no volunteer workers are available, these activities are carried out by the campaign staff.

At the beginning of 1961 it was considered that 63 per cent of the houses in the initially malarious area, which had 11,526,994 inhabitants, should be shifted into the consolidation phase, which would leave only 37 per cent of the houses, with 7,064,963 inhabitants, in the attack phase.

A review of the epidemiological situation made in November 1961 showed that interruption of malaria transmission had been achieved in areas that included 75 per cent of the population of the originally malarious area. Those areas were therefore shifted into the consolidation phase. Transmission still persists in the remainder of the area, which has 25 per cent of the population, and that part is still in the attack phase.

For technical and administrative purposes, the area in the attack phase was divided into zones where transmission is expected to be interrupted very shortly and those where sprays will have to be continued for a longer period. It is hoped that subsequent reviews will make it possible to expand the area in the consolidation phase until the entire original malarious area is covered.

UNICEF is providing insecticides, transport, and spraying equipment.

Provision is made for a chief malaria adviser, two malariologists, a health educator, an engineer, an assistant engineer, and a sanitarian, as well as for supplies, equipment, and fellowships.

INTERCOUNTRY PROGRAMSAMRO-93, Health Education (Zone II) (See page 178)

The consultant assigned to this project provides collaboration to the countries of the Zone in strengthening and expanding their health education services as well as in the training of health personnel of all categories in relation to the methods and media employed in modern health education.

Consultant services in health education are also provided to governments through other projects receiving the cooperation of the Organization, especially where these are concerned with the promotion of community water supplies, the improvement of nutrition, the development of integrated health services, and the control or eradication of communicable diseases.

Special emphasis is given to (1) the introduction or the intensification of training in health education as an integral part of training programs for public health workers as well as for medical and paramedical personnel; and (2) the elaboration of long-range plans for the development of professional services in health education based on careful studies of needs and opportunities. Considerable effort is also devoted to the stimulation of scientific research on sociological and anthropological factors having a bearing on health education. The promotion of a wider exchange of technical information on health education among the countries of the Zone is also a major concern of the project.

Provision is made for one health educator and for a small amount of supplies and equipment.

AMRO-114, Training Center for Malaria Eradication (Mexico) (See page 178)

This Center is one of four established on the American continent with the assistance of the Organization. By the end of 1961, 350 trainees had completed courses and about 510 observers from abroad had visited the Center.

Laboratory equipment for entomology and parasitology and the necessary vehicles for training have been supplied.

Provision is made for a grant for assistance in handling international visitors and fellows, and in 1962 and 1963 for a secretary and for common services.

AMRO-144, Health Statistics (Zone II) (See page 178)

The functions of the statistical consultant serving the countries of Zone II are: (a) to give cooperation and advice to governments for the improvement of vital and health statistics, with special emphasis on notifiable disease statistics, on the development of health statistics in accordance with recommended standards, and on the use of such data in program planning; (b) to arrange courses in statistics in cooperation with governments and to participate in the selection and follow-up of students receiving fellowships and in the development of seminars, workshops, and other types of training activities in this field; and (c) to advise on statistical aspects of other projects as well as to assist in the compilation and analysis of information required for the planning of programs.

Provision is made for one consultant in health statistics and limited amounts of supplies and equipment.

AMRO-162, Epidemiology (Zone II) (See page 178)

The functions of the consultant in epidemiology serving the countries of Zone II are: (a) to promote the development of programs for the eradication or control of communicable diseases; (b) to advise on methods and techniques of communicable disease control; (c) to coordinate, or to assist in coordinating, programs for the eradication or control of quarantinable diseases; (d) to promote improvement in the reporting of communicable disease; and (e) to advise on all problems related to the application of the International Sanitary Regulations.

Provision is made for one epidemiologist in 1962 and 1964 and for one clerk-stenographer in 1964. Limited amounts of supplies and equipment are also provided.

AMRO-178, Veterinary Public Health (Zone II) (See page 178)

The public health veterinarian assigned to this project provides advice and assistance to the countries of the Zone in (a) developing and reorganizing veterinary public health activities and services, especially for the study of the problems of zoonoses and the execution of measures for the protection and control of foodstuffs; and (b) promoting the teaching of public health in veterinary medicine.

The development of these activities at the national level, and the coordination of the work of the regional veterinary services within the framework of public health programs, will be the main duty of the consultant in the different countries of the Zone.

Provision is made for a public health veterinarian and for supplies and equipment.

AMRO-205, Sanitary Engineering (Zone II) (See page 180)

The Sanitary Engineer of the Zone will assist with the following activities in all countries of the Zone: coordination of the work of the Organization's engineers stationed in country projects; advice to governments on matters relating to technical, financial, and administrative aspects of water supply, sewage disposal, and industrial waste disposal, garbage and refuse disposal, food and milk sanitation, air pollution, vector control, industrial hygiene, and sanitary aspects of housing. The engineer will be available to cooperate with governments in the development and submission of projects to various financing agencies, and will assist, as requested, in all phases of such projects; he will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

The training of sanitary engineers and sanitarians, and the strengthening of environmental sanitation services in Ministries of Health, will be the major areas of service to the countries.

Provision is made (1963-1964) for one sanitary engineer and one clerk stenographer, a limited amount of supplies and equipment, and fellowships. Provision is further made for supplies and equipment in 1963 and for fellowships in 1963 and 1964 for the water supply program.

AMRO-290, Nursing (Zone II) (See page 180)

The Nurse Adviser assigned to Zone II will assist with the following activities in all countries of the Zone: (1) technical guidance of nurses stationed in country projects; and (2) cooperation with national departments of health to determine nursing and midwifery needs and resources; to plan programs for public health and hospital nursing, midwifery services, and nursing education; to develop these professions in order that they may provide optimum services adapted to changing health needs; and to evaluate nursing and midwifery programs.

The Nurse Adviser will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

Major areas of service to Ministries of Health will be the strengthening of nursing and midwifery services and the training of personnel for these services.

Provision is made, beginning in 1963, for a nurse and a clerk stenographer, as well as for supplies and equipment.

AMRO-313, Medical Education (Zone II) (See page 180)

Schools of medicine in Zone II are making improvements in medical education. However, this development

requires consultant services. For this reason, a medical educator is to be assigned to Zone II to study the status of teaching in the schools of the Zone, to give advice and consultation to individual schools as requested, to make recommendations as to other assistance that could be provided by the Organization, to prepare a plan for the promotion of medical education in the Zone, and to assist in strengthening collaboration with other interested agencies, governmental and private.

Provision is made in 1963 for one professional educator.

AMRO-314, Planning (Zone II) (See page 180)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises governments on request on the preparation and execution of national health plans as components of national plans for social and economic development. Consultants will also render advisory services to the governments on the organization of planning units within Ministries of Health.

Upon requests by countries, brief courses regarding principles and techniques of planning will be developed to orient key personnel of national health services.

Provision is made for short-term consultants, and, in 1964, for fellowships.

## PART III

## ZONE III

Zone Office (See page 182)

For text see "Zones Offices," page 39.

BRITISH HONDURASBRITISH HONDURAS-1, Malaria Eradication (See page 182)

The 22,965 square kilometers, the whole of this territory, represent the malarious area, with the total population of the country at risk.

The important vector is A. albimanus. Malaria transmission occurs throughout the year, with greater intensity between the months of May to November.

The malaria eradication program was begun in 1957, with dieldrin. After resistance to dieldrin was verified in A. albimanus, in early 1959, a change was made to DDT, which is now exclusively employed. For these reasons 1959 is considered as the first year of total coverage, and is the year in which the service was completely reorganized.

The Service has 19 sprayers divided into 5 squads, who treat approximately 18,400 houses twice a year.

Between January and October 1961 a total of 11,813 slides were collected of which 23 were found positive (22 P. vivax and 1 P. falciparum). It was subsequently verified that two of the P. vivax cases and the one P. falciparum were imported from other countries.

UNICEF cooperates through the provision of supplies and equipment.

Provision is made for one medical officer and one sanitary inspector (1962 and 1963 only). Additional technical assistance is provided through project AMRO-118. Provision is also made for antimalaria drugs and entomological material.

BRITISH HONDURAS-5, Health Services (See page 184)

Since 1957 the Organization has cooperated in the improvement of the public health services of the country, especially in the training of nurses, of traditional midwives, and the operations of the rural services. Plans are made to reorganize the Central Public Health Laboratory for which a technician was trained through a fellowship. Fellowships have also been awarded to nurses, inspectors, and one engineer. In 1961 the necessary data were collected and analyzed to prepare a long-range national health plan. A Central Health Committee was established and met at the end of the year to draw up the plan in question. The tasks were unfortunately interrupted owing to the emergency situation created by hurricane "Hattie". Activities are expected to be resumed in 1962.

Provision is made for technical advisory services in the execution of the program through the services of one sanitary engineer and one public health nurse, as well as for fellowships in 1964.

BRITISH HONDURAS-6, PAHO Fellowships for Health Services (See page 184)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

BRITISH HONDURAS-7, Promotion of Community Water Supplies (See page 184)

In 1961, assistance was provided at the request of the Government in a preliminary study of the water supply of the city of Belice. Now, there is much interest in preparing a national plan for community water supply for urban and rural areas. Provision is therefore made in 1963 and 1964 for one engineer specialized in the design of water supply and sewage disposal systems, as well as for short-term consultants.

COSTA RICACOSTA RICA-2, Malaria Eradication (See page 184)

The malarious area covers 61.8 per cent of the country, with a population of 393,560, representing 33.7 per cent of the country's population. The number of houses sprayed every six months is 71,455, of which 5,213 are protected by private companies.

The eradication program began in 1957 with total coverage with DDT. In September 1960 the third year of sprayings was completed according to plan.

Field data show the general epidemiological situation in the malarious area and the areas where transmission persists, which are limited to three groups of localities in Puntarenas Province.

In 1960, 67,643 blood samples were examined, of which 2,100 (2.96 per cent) were found positive. Of the 52,536 slides examined in 1959, 1,899 (3.61 per cent) were positive. There has been a significant reduction in P. falciparum infections, and during the fourth year of coverage only 32 cases as against 91 cases during the third year were reported.

Special attention in total coverage was given to an area containing 4.5 per cent of the population of the malarious area, which gave rise to 45 per cent of all cases. In addition to intensive sprayings, suppressive drug treatment was applied to a population of about 17,000 and all cases reported since 1959 were radically treated. Great care has been taken to spray all new houses or surfaces that have been changed or altered; in addition all mosquito nets have been sprayed.

UNICEF cooperates by providing supplies and equipment.

Provision is made for one physician, one entomologist (1962-1963), two sanitary inspectors, fellowships, and anti-malaria drugs.

COSTA RICA-14, National Health Services (See page 186)

On the basis of a technical evaluation of the public health program in Costa Rica made in collaboration with the Organization in 1958, it was concluded that the network of health units in the country should be expanded and that, in addition, the preventive activities of those units should be enlarged so as to provide services as required by the needs as they emerge.

The objectives of this program are as follows:

(a) to expand local public health services by increasing the number of health units and broadening their activities; (b) to give special attention to the expansion of maternal and child care services, in regard to both dispensary services and home care; (c) to implement a practical and systematic plan for water supply and waste disposal in rural communities; and (d) to train the national personnel required to undertake this expansion.

Provision is made for fellowships and for the services of a medical officer.

COSTA RICA-18, Advanced Nursing Education (See page 186)

This program was established to cooperate with the Government in a program of advanced nursing education at the School of Nursing of Costa Rica, through the development of post-basic and advanced courses for nurse training. The courses planned include midwifery, anaesthesiology, and nursing administration and supervision.

Since October 1960 the program has had the collaboration of a nurse consultant who, in addition to her specific functions, has collaborated at the request of the Ministry of Public Health in the evaluation of the School of Nursing with a view to its possible future incorporation in the University.

A course in anaesthesiology was begun in March 1961 with 14 nurse participants. In the same year a three-month post-basic course in administration was given for hospital nurses and attended by 30 nurses. The midwifery course, which has been given at the school since 1954, has now become the responsibility of the department in charge of advanced nursing education.

For the purpose of continuing the cooperation of the Organization, provision is made for a nurse educator, fellowships and participants, and some supplies and equipment.

COSTA RICA-21, Nutrition

(No budgetary provision - advice of regular staff only)

An expanded nutrition program was begun in 1961 with the participation of agencies of the Ministries of Public Health, Public Education, and of Agriculture and Livestock,

in order to contribute to the improvement of the nutrition of the population.

In its initial three-year phase the project will be carried out in 46 community areas of the central plateau of the country and, depending on the experience acquired and on the availability of resources, it will be extended to cover the entire country.

FAO has been collaborating in this project in its own sphere of work. UNICEF's contribution has consisted of furnishing supplies and equipment as well stipends for the training of personnel in the country.

The Organization provides technical advisory services on nutrition aspects through INCAP, and on the remaining phases of the program relating to public health through Zone III Office. Within the limits of its possibilities, the Organization will provide fellowships for the study abroad of subjects relating to this project.

COSTA RICA-22, Promotion of Community Water Supplies (See page 186)

In 1960 assistance was given to Costa Rica in legal and administrative matters relating to the establishment of a new central water supply agency as well as in training personnel in the financial and administrative aspects of water supply and sewage disposal systems. In 1961 assistance was given in the organization of the new water supply agency, which was established by law during that year.

Provision is made for one engineer specialized in the design of water supply systems, and for short-term consultants.

COSTA RICA-24, Laboratory for the Diagnosis of Viral Diseases (See page 186)

The increasing significance of viral diseases have emphasized the need for public health laboratories to expand their activities in the field of virology, especially diagnostic facilities.

The objective of this project is to collaborate with the Government in organizing, within the public health laboratory of the Department of Public Health, the necessary services for the diagnosis of viral diseases. The Government will provide the basic equipment and the installations for the laboratory.

Provision is made for short-term consultants to advise on the establishment of methods and procedures and for the award of fellowships to national personnel for study abroad.

COSTA RICA-201, WHO/TA Fellowships for Health Services (See page 186)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its public health services.

## EL SALVADOR

### EL SALVADOR-2, Malaria Eradication (See page 188)

Out of a total area of 21,146 square kilometers in El Salvador, the malarious area covers 19,300 square kilometers, and the population at risk is 1,900,000 or 72.8 per cent of the total.

The months of greatest transmission are from June to December, and the principal vector is A. albimanus.

This eradication program was begun in 1956, with DDT and dieldrin. After two years of total coverage, it was decided to use DDT only, because of the resistance to dieldrin found in all the zones in which susceptibility tests were carried out. Resistance to both dieldrin and DDT was found in some areas.

The change in operations approved in August 1958 and initiated in mid-1959 required an increase in spray personnel, equipment, materials, and transport, and the new cycles of total coverage began to be counted from that date.

The second cycle of the third year of the new total coverage with DDT was begun in January 1962; the insecticide is being applied to all houses in the malarious area at the rate of two cycles annually. In the localities in which there is resistance to DDT, mass chemoprophylaxis and, eventually, control of breeding places, is to be used, in addition to intradomiciliary spraying.

Simultaneously with the conduct of this program, the Organization, in cooperation with the Government, has organized special activities such as a study of the causes of the persistence of malaria transmission, behaviour of anophelines in the presence of insecticides, the effects of different dosages of insecticides, a program of mass antimalaria drugs prophylaxis in Jiquilisoc, and malathion trials in certain localities of the La Paz Department. Studies are also being made of the efficacy of larvicides in a limited area.

UNICEF has cooperated by providing supplies and equipment.

Provision is made for a team composed of one malariologist (in charge of the program), one sanitary engineer, one entomologist, two sanitary inspectors, and one entomological aide, as well as for fellowships and antimalaria drugs. A second medical officer will be added to the team in 1963.

### EL SALVADOR-9, PAHO Fellowships for Health Services (See page 188)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

### EL SALVADOR-11, National Public Health Nursing Services (See page 188)

In order to meet nursing service needs for the country as a whole, this project is designed to strengthen nursing at the national level and through the latter, at regional and local levels. This is to be done by emphasizing the

administrative, supervisory, and teaching responsibilities of nursing personnel and by developing in-service training programs so that national nurses may carry out their respective functions in these areas at all levels.

The Organization will provide through 1962 a public health nurse experienced in administration and supervision to assist the national authorities in the development of the project. In 1963, this consulting service will be continued under project El Salvador-19.

### EL SALVADOR-12, National Environmental Sanitation Services (See page 188)

During the last few years, rural sanitation services as part of a demonstration project in Quezaltepeque in public health have been emphasized. In five courses a total of 85 national sanitarians and four others were trained.

In order to emphasize activities in urban water supplies and the necessity of strengthening national environmental sanitation services, a sanitary engineer assisted with a plan of work in which the collaboration of all interested agencies of the Government in the establishment of adequate water supplies and sewage disposal was foreseen.

Provision is made for continuation of the services of the sanitary engineer through 1962. Beginning in 1963 advisory services will be provided under project El Salvador-19.

### EL SALVADOR-14, Promotion of Community Water Supplies (See page 188)

In 1961, a new water supply and sewage disposal agency was created in El Salvador. To this end, assistance was given in the legal and administrative aspects, as well as in the education and training of key personnel for this new agency. In view of the important plans for developing and constructing community water supplies, it will be necessary to provide extensive consultant services.

Provision is made for a consultant specialized in the design of water supply and sewage disposal systems, as well as for short-term consultants. Fellowships have been provided by the Inter American Development Bank in 1962.

### EL SALVADOR-15, Public Health Laboratory (See page 188)

The objective of this project is to collaborate with the Government in the development of public health laboratories, both at the central level and in the health districts into which the country is divided. A new building was recently constructed for the central public health laboratory, and its training program for laboratory personnel was expanded by holding a course for laboratory workers organized by the National Department of Health in collaboration with the School of Medicine of the Autonomous University of El Salvador.

It is planned to extend the laboratory operations to all public health activities, including studies on communicable diseases of epidemiological interest. It is further planned to intensify the control of foodstuffs, beverages, drugs, and pharmaceutical products, and to give specialized training to the personnel required for these activities.

A necessary supplement will be the development of facilities for training the auxiliary personnel of the public health laboratories operating in the health districts, and the establishment, at the central level, of a colony of laboratory animals.

Provision is made for a medical officer and for fellowships.

#### EL SALVADOR-16, Nutrition

(No budgetary provision - advice of regular staff only)

An expanded nutrition program was begun in 1961. The agencies of the Ministries of Public Health and Social Welfare, Culture, and Agriculture and Livestock, whose activities can contribute to the improvement of the nutrition of the population participate in it.

In its initial 3-year phase the project will be carried out in the zone which includes the Departments of San Vicente, La Paz, Cuzcatlan, and Cabanas and, depending on the experiences acquired and on the availability of resources, the project will be extended to cover the entire country. FAO has been cooperating in this project within its own sphere of work. UNICEF's contribution has consisted of supplies and equipment as well as stipends for the training of personnel in the country.

The Organization provides technical advisory services on nutrition through INCAP, and on the remaining phases of the program relating to public health through the Zone III Office. Within the limits of its possibilities, the Organization will provide fellowships for the study abroad of subjects relating to this project.

#### EL SALVADOR-19, National Health Services (See page 190)

In 1951 El Salvador initiated a demonstration of local public health services. The Organization collaborated in this project (El Salvador-5) which contributed to a study of administrative and technical procedures adequate for regionalization of public health services as well as serving as field training for numerous professional, subprofessional and auxiliary personnel. In 1960, it was decided to expand advisory services in organization of hospital services (El Salvador-10), public health nursing (El Salvador-11) and environmental sanitation (El Salvador-12).

It is now proposed to consolidate these advisory services in 1963 for the purpose of improving coordination at the national level. Provision is therefore made in 1963 for continuation of the services of the medical officer, the sanitary engineer and the nurse previously shown under separate projects.

### GUATEMALA

#### GUATEMALA-1, Malaria Eradication (See page 190)

The malarious area of Guatemala covers 73 per cent of the 108,889 square kilometers comprising the total surface area of the country, and the population at risk is estimated at 43 per cent of the total population. The principal vector is *A. albimanus*.

The attack phase of the eradication campaign was begun in 1956, with an annual cycle of dieldrin sprayings. In 1959 the resistance of *A. albimanus* to dieldrin was confirmed, and on 15 October of that year a change was made to two six-month cycles with DDT per year.

In July 1958 the National Malaria Eradication Service was completely reorganized, after which a marked expansion of activities has been noted.

UNICEF cooperates in this project by furnishing insecticides, transport, equipment, spare parts, and various materials.

The campaign is at present concentrating on various areas of high transmission, which account for 71.1 per cent of the malaria prevalence in the country. In 1960 no cases of malaria were recorded in 60 of the 189 municipalities in the malarious area. During the first ten months of 1961, the number of cases rose to 108.

The reporting network is composed of 2,148 posts. In 1961, 219,628 blood films were examined, 4,083 or 1.9 per cent of which proved positive.

Provision is made for two malariologists, one sanitary engineer, and two sanitariums through 1964 and another sanitarian through 1963 in addition to anti-malarial drugs.

#### GUATEMALA-6, Nursing Education (See page 190)

Since 1955 the Organization has cooperated with the Government of Guatemala in preparing nurse instructors for the training of nursing auxiliaries, and in courses for the latter personnel. For this purpose a training center was established and is operating in Guatemala City while similar centers have been organized in departments in the interior of the country.

Considering that the training center for nursing auxiliaries has achieved a solid basis, the main efforts of this program are now directed toward the National School of Nursing, so as to assist the Government in strengthening the preparation of nurses on the basic and post-basic levels and thereby improve the nursing services.

In 1961 a six-months course in nursing supervision and administration was organized. Twenty-six nurses in positions of leadership in seven countries attended. This course will be repeated annually.

Provision is made for the services of two nurse educators, fellowships, and teaching supplies and equipment.

#### GUATEMALA-8, National Health Services (See page 190)

With the cooperation of the Organization, the Government of Guatemala organized a health demonstration area which, in addition to providing health services to the community, had a training center for both professional and auxiliary personnel. Four sub-centers and several health posts were established in the area with the main base of operations located in Amatitlan. In 1958 the Ministry of Public Health and Social Welfare, using the experience acquired in the demonstration area, prepared a national health plan designed to broaden and extend



these health services to the rest of the country, and has been gradually implementing this plan. Up to the end of 1961, 34 health centers, 5 sub-centers, and 21 posts were in different stages of reorganization, and it was planned to convert 8 health units and 87 dispensaries into preventive-curative centers.

The following divisions were established at the central level: epidemiology, general technical services, environmental sanitation, and local health services.

Up to the end of 1961 the following had been trained at the training center: 79 physicians, 1 chemist-biologist, 33 dentists, 62 nurses, 108 auxiliary nurses, 14 midwives, 110 sanitarians, 2 health educators, and 33 laboratory assistants.

UNICEF furnished supplies and equipment for the services of the demonstration area and especially for the environmental sanitation program.

Provision is made for a medical consultant, an engineer, a nurse, and a sanitary inspector, as well as for the purchase of teaching materials and equipment and, in 1962 and 1964, for fellowships.

#### GUATEMALA-11, Tuberculosis Control (See page 192)

From 1956 to 1958 a mass campaign of BCG vaccinations was carried out with the cooperation of UNICEF and the Organization. About 70 per cent of the population over one year of age were tuberculin tested and some one and a quarter million persons were vaccinated with BCG.

A second phase of development began in 1958 with a pilot control project in the Departamento de Escuintla. The techniques used consisted of the photo-fluorographic examination of the population over 15 years of age, examination of contacts, treatment of tuberculosis patients and chemoprophylaxis of contacts. Since then two other departments have started control programs. Through 1961, 17,961 persons have been examined and 3,129 were found tubercular. Of the latter, two-thirds are still receiving regular treatment.

Provision is made for a medical officer. In 1963 only, a bacteriologist will cooperate in the organization of diagnostic services and in training personnel in both traditional and new methods of laboratory diagnosis. In addition in 1963 and 1964, fellowships and limited supplies are provided.

#### GUATEMALA-12, PAHO Fellowships for Health Services (See page 192)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

#### GUATEMALA-13, Nutrition

(No budgetary provision - advice of regular staff only)

In 1958 a project on education in nutrition and development of school gardens was carried out in 70 rural communities by the General Administration for Rural Socio-Educational Development of the Ministry of Public Education.

In accordance with the original plan, the initial phase of this project is scheduled to last for five years, at the end of which and after final evaluation, the way in which the program may be continued will be examined, especially as regards a more direct participation of the agencies of the Ministries of Public Health and Social Welfare and of Agriculture.

FAO is cooperating in this project in its own sphere of work. UNICEF has provided supplies and equipment as well as stipends for training of personnel in the country.

Through INCAP, the Organization furnishes technical advisory services, especially in training in nutrition to the personnel in charge of the project activities.

#### GUATEMALA-14, Public Health in Schools of Veterinary Medicine (See page 192)

One of the severest obstacles to public health veterinary programs for the effective control of the zoonoses and food hygiene in the countries of Central America is the great shortage of veterinarians and the inadequacy of centers for teaching these professionals.

The School of Veterinary Medicine and Zootechnics of the University of San Carlos, Guatemala, was created in late 1957 and is now in the stage of academic and administrative organization. This School now has suitable premises and a teaching staff of 20, eight of whom are employed full time.

The immediate and principal objective of this project is to assist the authorities of this School in incorporating basic public health instruction in the curriculum and in strengthening the other departments directly associated with this subject.

Provision is made for short-term consultants to advise on the teaching and administrative organization of the Department of Public Health at the School, as well as for fellowships for faculty members.

#### GUATEMALA-17, Promotion of Community Water Supplies (See page 192)

In Guatemala interest is growing in solving the water supply problems in the capital and other localities that need to expand their existing systems or construct new installations. At the request of the Government, assistance was given in 1961 to the municipality of Guatemala for the study and review of the new water supply plan, especially the technical and administrative aspects of this project. In the first half of 1963 assistance will again be given by a short-term consultant, who will review the technical aspects of the project.

Provision is made for short-term consultants to assist the Government in the various technical, administrative, and financial aspects of water supplies in the country.

#### GUATEMALA-19, Public Health Legislation (See page 192)

Short-term consultants are provided in 1962 to assist the Government in a survey of present health legislation and plans for modernization of health ordinances.

HONDURASHONDURAS-1, Malaria Eradication (See page 194)

The malarious area of Honduras covers 87,389 square kilometers, or 78 per cent of the total surface area of the country, and is inhabited by 1,409,325 persons, or 73 per cent of the population.

Total coverage with dieldrin began in January 1958, and the first cycle was completed in November of the same year. On 15 July 1959 sprayings with DDT were resumed owing to the verification of resistance of *A. albimanus* to dieldrin. The fifth DDT spraying cycle was completed on 3 July 1961.

Since mid-1960 epidemiological evaluation activities have shown a considerable increase with more localities providing information.

UNICEF provides insecticides and equipment for the program.

Provision is made for one medical officer, one sanitary engineer, one entomologist and two sanitarians, and antimalarial drugs through 1964. Fellowships are provided in 1963.

HONDURAS-4, National Health Services (See page 194)

Since the end of 1955 the Organization has collaborated in the reorganization, improvement, and expansion of health services throughout the country. The project was begun with the establishment of a health center in a suburb of Tegucigalpa. It was subsequently found necessary to establish similar services in the other areas of the country, and to back this policy with a national long-term public health plan.

The first stage of this plan extends into 1963 and calls for the reorganization of the Public Health Administration, beginning with the organization and operation of the policy-making and executive divisions and departments. In 1962 the national health authorities will evaluate the first phase of the National Plan and will initiate the planning of a second phase, which will possibly last for five years after the first phase is completed.

Provision is again made for a medical officer, a sanitary engineer, a nurse, a sanitarian (1963-1964), and for fellowships.

HONDURAS-6, PAHO Fellowships for Health Services

(See page 194)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

HONDURAS-9, Promotion of Community Water Supplies

(See page 194)

In 1961 the Government established the new National Autonomous Water Supply and Sewage Disposal Agency for the purpose of planning, constructing, operating, and maintaining of these services throughout the country.

Provision is made for short-term consultants in the various technical, administrative, and financial aspects of this new water supply service. Beginning in 1963, provision is also made for an engineer specialized in the design of water supply and sewage disposal systems, owing to the shortage of qualified local staff for this type of activity.

HONDURAS-10, Port City Development (See page 194)

Plans have been prepared for the extension of facilities of the port of Puerto Cortes, which, when implemented, will have the effect of greatly increasing port activities. It is necessary to carry forward a corresponding improvement and extension of the utility services of the city, particularly water supply, sewerage and drainage, all of which are deficient under present conditions and which will be critically inadequate to support expanded port operations. Thus, serious public health problems may arise.

Short-term consultants are being provided in 1962 to finish studies and recommendations for a positive plan of action.

HONDURAS-12, Public Health Legislation (See page 196)

Short-term consultants are provided in 1962 to assist the Government in a survey of present health legislation and plans for modernization of health ordinances.

HONDURAS-51, Nutrition

(No budgetary provision - advice of regular staff only)

An expanded nutrition program will begin in 1962. The agencies of the Ministries of Public Health and Social Welfare, Public Education, and Natural Resources whose activities can contribute to improving the nutrition of the population will participate in it.

In its initial 3-year phase the project will be carried out in the areas of Danli, Choluteca, and San Marcos de Colon, and, depending on the experience acquired and the availability of resources, the project will be extended to cover the entire country.

It is also expected that FAO will collaborate in its own sphere of work and that UNICEF will contribute supplies and equipment, as well as stipends for the training of personnel in the country.

The Organization will provide technical advisory services through INCAP on nutrition, and on the remaining aspects relating to public health through its Zone III Office. Within the limits of its possibilities, the Organization will provide fellowships staff for the study abroad of subjects relating to the project.

NICARAGUANICARAGUA-1, Malaria Eradication (See page 196)

The malarious area of Nicaragua covers 131,000 square kilometers and contains 1,486,399 inhabitants or 95 per cent of the country's population.

Eradication activities with dieldrin were begun at the end of 1957, but owing to administrative deficiencies it was not possible to achieve total coverage of the malarious area. The program was reorganized on a new administrative basis in 1958. When resistance of A. albimanus to dieldrin was confirmed, it was decided to change to DDT.

Basically, the activities of the campaign are: (1) intradomestic spraying with a residual insecticide, which at present is DDT; (2) evaluation and epidemiological surveillance; (3) supplementary measures to strengthen the attack phase in areas where transmission persists; and (4) special epidemiological surveys in areas where transmission persists.

UNICEF cooperates in this project by supplying insecticides, vehicles, equipment, spare parts, and various materials.

Provision is made for one medical officer, one sanitary engineer, two sanitary inspectors, and one entomological aide as well as for antimalaria drugs and laboratory materials. A second medical officer will be added to the team in 1963.

#### NICARAGUA-5, Nursing Education (See page 196)

In 1955 a survey was made of nursing needs and resources existing in the country. This was followed by a program of cooperation with the National School of Nursing, with the following aims: reorganization of the administrative and teaching systems; revision of the curriculum, incorporating social and public health aspects of nursing; preparation of instructors and nurse supervisors; establishment of suitable field practice areas for student nurses; improvement of the physical facilities, teaching equipment and supplies, and services of the School.

The School has attained a higher level as a teaching institution and at present 68 students are registered, a considerable increase in the number of trainees who, in addition, have better basic training since entrance requirements have recently been raised.

A seminar to evaluate the School and its program after five years of the Organization's cooperation was held in February 1961. It recommended that the curriculum be revised in order to strengthen certain aspects of the teaching and practice, and that the administrative basis be improved, as related particularly to the budget.

For the purpose of consolidating the gains achieved in this project, provision is made for two nurse educators in 1962 and 1963, and one in 1964, as well as for fellowships and a limited amount of supplies and equipment.

#### NICARAGUA-7, FAO Fellowships for Health Services (See page 196)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

#### NICARAGUA-10, Promotion of Community Water Supplies (See page 196)

The authorities of Nicaragua are greatly interested in organizing an autonomous water supply and sewage

disposal service and in preparing a national plan for water supply services for the next ten years.

In 1961 views were exchanged with the Government regarding assistance of the Organization in the development of these plans. As a result of such conversations, provision is made for a consultant specialized in design and planning of water supply systems, and for short-term consultants to assist the Department of Municipal Services in the preparation of a ten-year program.

#### NICARAGUA-11, Nutrition

(No budgetary provision - advice of regular staff only)

An expanded nutrition program was begun in 1961. The agencies of the Ministries of Public Health, Public Education, and Agriculture and Livestock, whose activities can contribute to the improvement of the nutrition of the population participated in it.

In its initial 2-year phase the project will be carried out in the Departments of Carazo, Rivas, Granada, and Masaya, and depending on the experience obtained and the availability of resources, the project will be extended to cover the entire country.

FAO has been collaborating in this project in its own sphere of work. UNICEF has contributed by providing supplies and equipment, as well as stipends for the training of personnel in the country.

The Organization provides technical advisory services on nutrition through INCAP, and on the remaining aspects relating to public health through its Zone III Office. Within the limits of its possibilities, the Organization will provide fellowships to local staff for the study abroad of subjects relating to this project.

#### NICARAGUA-13, Medical Education (See page 198)

At the request of the authorities of the university and of the Ministry of Health, the Organization has been cooperating with the School of Medical Sciences of the National University of Nicaragua in improving medical education at that School. The Organization has furnished advisory services for the revision of the teaching of basic sciences and in planning the Department of Preventive Medicine, and has awarded fellowships for training faculty members.

Provision is made in 1964 for intensified cooperation with the School of Medical Sciences through visiting professors and the training of faculty members, as well as for supplies and equipment.

#### PANAMA

#### PANAMA-1, National Health Services (See page 198)

Since 1952 the Organization has collaborated with the Government in the development of rural and urban public health services. Initially, the project was established in a rural area to serve as a health center for demonstrating techniques and training of personnel of the country, including field practice for personnel. In 1955 the Department of Public Health was reorganized, decentralizing

its day-to-day administration and creating health regions as intermediate levels of administration. However, the policy-making function continued under central direction. The country was divided into three health regions each with a certain degree of autonomy.

The project, as modified, now has its objectives: improvement and expansion of public health services, initially through detailed study and development of regional health plans for each of the three regions; development of national health plans in coordination with national plans for social and economic development; efficient methods of administration and development of medical care services for the greatest number of people, emphasis being given to establishing conveniently distributed health centers to provide integrated health services; and, elevation of the level of technical health services through training.

Provision is made for a chief country adviser, a sanitary engineer, a hospital administrator (1962), and a public health veterinarian. In 1963 and 1964 provision is made for fellowships and supplies. In addition, a specialist in administrative methods is to be provided by the United Nations as part of the international team.

#### PANAMA-2, Malaria Eradication (See page 198)

The malarious area of 68,497 square kilometers covers 92 per cent of the area of the country and contains 1,032,519 or 93 per cent of the total inhabitants of Panama.

Total coverage was begun in 1957 with dieldrin, which is still being used. Since the desired results have not been obtained, the attack phase will have to be extended, using DDT.

UNICEF provides insecticides, equipment, vehicles, and various materials.

Provision is made for one medical officer, one sanitary engineer, one entomologist, and two sanitary inspectors, as well as for antimalaria drugs, supplies and fellowships.

#### PANAMA-8, PAHO Fellowships for Health Services (See page 198)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

#### PANAMA-9, Promotion of Community Water Supplies (See page 200)

In 1961 legislation was enacted in Panama creating the Nation Water Supply and Sewage Disposal Institute, a central agency in charge of all community water supply and sewage disposal services. At the request of the Government, the Organization provides assistance in administrative methods and accounting for such services in the city of Panama. It is expected that the new agency will require considerable assistance in the matter of design, and additional assistance in administration and financing.

Provision is made for short-term consultants and beginning in 1963 for one sanitary engineer specialized in water supplies.

#### PANAMA-10, Planning and Organization of Hospital Services (See page 200)

There are general and special hospital services situated at different places in the country as well as private hospitalization facilities. Because of the lack of organization of the services and of coordination between the various institutions, the present network of hospitals is deemed unable to cope with the medical care needs of the country.

Beginning in 1963 provision is made for a hospital administrator who will provide technical advice on the establishment of a modern hospital system.

#### PANAMA-11, Nutrition

(No budgetary provision - advice of regular staff only)

The agencies of the Ministries of Labor, Social Welfare and Public Health, Education and Agriculture, and Commerce and Industry, whose activities can contribute to the improvement of the nutrition of the population, will participate in an expanded nutrition program to begin in 1963.

In its initial two-year phase, the project will be carried out in the Central Health Zone, which covers the provinces of Cocolé, Herrera, Los Santos, and Veraguas and, depending on the experience acquired and the availability of resources, the project will be extended to cover the entire country.

It is expected that FAO will cooperate in its own sphere of work and that UNICEF will furnish supplies and equipment, as well as stipends for the training of personnel in the country.

The Organization will provide technical advisory services on nutrition through INCAP, and on the remaining aspects relating to public health through its Zone III Office. Within the limits of its possibilities, the Organization will grant fellowships for the study abroad of subjects relating to this project.

#### INTERCOUNTRY PROGRAMS

#### AMRO-13, Seminar on Sanitary Engineering (Zone III) (See page 200)

The III Seminar on Sanitary Engineering for Central America and Panama, which was held in Honduras in 1961 and attended by 65 delegates from the countries of Central America and from international agencies, recommended that the IV Seminar be held in Panama City in 1964.

The Seminar held in Tegucigalpa was instrumental in promoting water supply services in the Zone owing to the fact that it was attended by the officials in charge of such services in the various countries.

The IV Seminar, which is planned to be held in Panama, will be devoted to the study of sewerage and treatment plants and standards for design and planning.

It is expected to conduct this Seminar in collaboration with AIDIS of Central America and Panama, as was done for the one held in Tegucigalpa. The Organization's assistance in 1964 will consist of fellowships for engineers and senior officials of drinking water supply and sewage disposal projects in the various countries to enable them to attend the Seminar.

AMRO-54, Institute of Nutrition of Central America and Panama (See page 200)

The Institute of Nutrition of Central America and Panama was created in 1949 by the Governments of those countries for the purpose of studying their basic nutritional problems and of finding a realistic approach to their solution.

From its very beginning, INCAP has received assistance from the Organization. The Organization is represented on the Institute's Council and, by mutual agreement, is responsible for its administration.

During its twelve years of existence, INCAP has developed a broad research program. The program is financed by several institutions, and has already yielded significant results. The utilization of potassium iodate in the prevention of endemic goiter and the development of a cheap vegetable mixture (INCAPARINA) for the large-scale control of protein deficiency are examples of positive results of applied research conducted by INCAP.

An activity now receiving special attention from INCAP is the training of personnel for the health services of countries in this Region. A School of Nutritionists has been in operation in INCAP since 1959. Since 1960 a three-month course on nutrition has been given for public health physicians.

The Organization will continue its collaboration with INCAP in the coming years. Provision is made for financing the meetings of the Directing Council and of the Technical Advisory Committee, for the salaries of the Director, Assistant Director, nutrition educator, and two editorial assistants, and for short-term consultants including the consultant director. In addition, proposed contributions and subsidies are shown.

AMRO-86, Health Statistics (Zone III) (See page 202)

The functions of the statistical consultant assigned to the countries of Zone III are: (a) to give advice and assistance to countries on the improvement of vital and health statistics, with special emphasis on notifiable disease statistics, on development of health statistics in accordance with recommended standards, and on use of the data in program planning; (b) to organize courses in statistics and to assist in the selection and follow-up of fellows and in the development of seminars, workshops, and other training activities in statistics; and (c) to advise on the statistical aspects of programs and assist in the compilation and analysis of information for program planning.

Provision is made for the services of a health statistician.

AMRO-118, Malaria Technical Advisory Services (Zone III)  
(See page 202)

The purpose of this project, which was started in 1957, is to supplement the technical advice given to the countries of Zone III on malaria eradication activities and, at the same time, to make possible a more direct and intensive supervision of the work of the international personnel assigned to the malaria programs of the different countries. In addition, this project makes it possible to provide specialized advisory services in certain aspects which, although of great importance for malaria programs, do not justify a consultant for each country.

To fulfill these purposes, the project provides for a medical officer, a consultant in administrative methods, and a secretary. An entomological aide will complete his services at the end of 1962.

AMRO-148, Laboratory for Production of Biologicals (Zone III) (See page 202)

Biological products used in public health programs are produced on a limited scale in laboratories in the countries of Zone III. However, a shortage of trained personnel and budgetary limitations have impeded the production of biologicals in sufficient quantities to satisfy the needs of the various countries. The national health authorities want to increase the availability of immunizing agents at a cost compatible with their resources and in sufficient quantities to cover their needs.

To that end a survey of needs for biologicals for human and veterinary use and the resources for producing them was carried out in each of the countries of Central America and Panama. Data were compiled and analyzed on the following aspects of the existing laboratories in the countries: personnel and institutions available; type, quantity, and quality of the biologicals manufactured; requirements of biologicals for immunization programs; consumption and use of imported and locally produced biologicals; costs of production and resources currently used for the purpose.

A report of this survey and a project for a regional laboratory were submitted to the Governments for study and consideration. It is expected that the financing and location of the regional laboratory will be jointly decided upon by the several countries in the Zone.

Provision is made for short-term consultants in 1962 and for a medical officer beginning in 1963, as well as for the purchase of supplies and equipment and the training of technicians.

AMRO-188, Veterinary Public Health (Zone III)  
(See page 204)

The public health veterinarian assigned to this project provides advice and assistance to the countries of the Zone in (a) developing and reorganizing veterinary public health activities and services, especially for the study of the problems of zoonoses and the execution of measures for the protection and control of foodstuffs; and (b) promoting the teaching of public health in veterinary medicine.

Given the present stage of development of veterinary public health services in the countries of Zone III, a seminar is planned in which the chiefs of veterinary public health services of all the countries in Central America and Panama will participate. The purpose of the seminar will be to define more clearly the field of endeavors and the role of public health veterinarians. Thus, the principal topics to be examined will be: program planning, field activities, consultant services, relations with agriculture and other agencies, and training of personnel.

Provision is made for a public health veterinarian, supplies, and in 1964 for seminar participants and fellowships.

AMRO-202, Leprosy Control (Zone III) (See page 204)

The survey of the extent of the problem of leprosy in Central America has shown the existence of active foci of the disease in all the countries of Zone III. A coordinated program for control of the disease in these countries is considered feasible and the Governments are interested in expanding and intensifying activities in this field.

After a study, country by country, of the present situation the consultant of the Organization collaborated with the respective Governments in the preparation of control programs, giving special attention to: (a) training of personnel in the diagnosis and treatment of ambulatory patients; (b) organization of a central agency for advice to and supervision of field activities; and (c) establishment of an adequate system of case-finding and control of cases and contacts.

Provision is made for a medical officer in 1962 and 1963 to continue assisting in the establishment of leprosy control programs in the Zone.

AMRO-203, Epidemiology (Zone III) (See page 204)

The functions of the consultant in epidemiology are: (a) to promote the development of programs for the eradication and control of communicable diseases; (b) to advise on new control methods and techniques; (c) to coordinate the programs for the eradication or control of quarantinable diseases in the countries of the Zone; (d) to promote better reporting of communicable diseases; and (e) to advise on all problems related to the application of the International Sanitary Regulations.

This project was begun in mid-1961 with the appointment of a medical officer. The first six months of activities were devoted to improving the practices of epidemiological surveys, the preparation of bases for the work programs of the epidemiological sections of the Health Department, and a plan to intensify the collection of morbidity data on communicable diseases. Special attention was given to improving the level of immunity of the population against smallpox, and cooperation was given to the Governments of the countries in the Zone to increase the number of immunizations against this disease.

Provision is made for the continuation of the services of a consultant as well as for supplies and equipment.

AMRO-206, Sanitary Engineering (Zone III) (See page 204)

The Zone sanitary engineer will assist with the following activities in all countries of the Zone: coordination of the work of the Organization's engineers stationed in country projects; advice to Governments on matters relating to technical, financial, and administrative aspects of water supply, sewage disposal, and industrial waste disposal, garbage and refuse disposal, food and milk sanitation, air pollution, vector control, industrial hygiene and the sanitary aspects of housing. The engineer will be available to cooperate with Governments in the development and submission of projects to various financing agencies, and will assist, on request, in all phases of such projects; he will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

The training of sanitary engineers and sanitarians, and the strengthening of environmental sanitation services in Ministries of Health, will be the major areas of service to the countries.

Fellowships, including some specifically for the water programs are provided. Beginning in 1963, provision is made for a sanitary engineer and a secretary. A limited amount of equipment for use in the water program is provided in 1963.

AMRO-237, Medical Education (Zone III) (See page 204)

Schools of medicine in Central America and Panama have continued to make improvements in medical education. However, this development requires consultant services on a continuing basis. For this reason, a medical educator is to be assigned to Zone III to study the status of teaching in the schools of the Zone, to give advice and consultation to individual schools as requested, to make recommendations as to other assistance that could be provided by the Organization, to prepare a plan for the promotion of medical education in the Zone, and to assist in strengthening collaboration with other interested agencies, both governmental and private.

Provision is made for a professional educator, as well as for fellowships for training faculty members.

AMRO-246, Tuberculosis Control (Zone III) (See page 206)

The purpose of this project is to collaborate with Governments in Central America and Panama in utilizing new developments for an active program for the prevention of tuberculosis by means of: training of national personnel in new techniques and procedures for the management of tuberculosis problems; survey of the tuberculosis situation in the various countries of the Zone in order to gain more exact and complete information on the problem in the various population groups, as well as of resources available for tuberculosis control in the countries; field trials of mass prophylactic administration of isoniazid, since there is a probability that appropriate dosages for a sufficient length of time can lessen transmission and development of new cases.

Provision is made for a medical officer.

AMRO-253, Administrative Methods and Practices in Public Health (Zone III) (See page 206)

In response to the XXXV Resolution passed during the X Meeting of the Directing Council, and in accordance with the Recommendation of the VI Meeting of Ministers of Public Health of Central America and Panama, the countries in Zone III have started programs in administrative methods and practices in their public health services. The Organization has also given assistance in this field in relation to the operation of national services for malaria eradication.

In view of the growing interest in modernizing their services and because of the urgency to improve their expanding health programs, the Organization will give additional advice and assistance.

Provision is therefore made beginning in 1963 for an administrative methods consultant.

AMRO-291, Nursing (Zone III) (See page 206)

Following a study on decentralization considered by the Executive Committee at its 43rd Meeting, it was decided that starting in 1963 technical staff of Zone Offices should be shown under intercountry projects within their respective Zones.

The nurse adviser assigned to Zone III will assist with the following activities in all countries of the Zone: (1) technical guidance of nurses stationed in country projects; and (2) cooperation with national departments of health to determine nursing and midwifery needs and resources; to plan programs for public health and hospital nursing, midwifery services, and nursing education; to develop these professions in order that they may provide optimum services adapted to changing health needs; and to evaluate nursing and midwifery programs.

The nurse adviser will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

Major areas of service to Ministries of Health will be strengthening of nursing and midwifery services and training of personnel for these services.

Provision is made for one nurse and one secretary beginning in 1963.

AMRO-303, Medical Care (Zone III) (See page 206)

The Organization has been directing its efforts toward the formulation of integrated programs in which medical care appears side by side with the other activities as one of the basic health services.

In view of the interest shown by the Governments in reorganizing their medical care services, the services of a specialized consultant were provided to promote the integration of medical care services into the general health programs, to strengthen technical standards, to plan the application of these standards, especially in any new activities that might be initiated, and to organize suitable hospital systems.

Provision is made for a medical officer.

AMRO-325, Planning (Zone III) (See page 206)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises governments on request on the preparation and execution of national health plans as components of national plans for social and economic development. Consultants will also render advisory services to the governments on the organization of planning units within Ministries of Health.

Upon requests by countries, brief courses regarding principles and techniques of planning will be developed to orient key personnel of national health services.

Provision is made in 1964 for short-term consultants and fellowships.

Zone Office (See page 208)

For text see "Zone Offices," page 39.

BOLIVIABOLIVIA-4, Malaria Eradication (See page 208)

The malarious area of Bolivia covers approximately 75 per cent of the country's territory and contains an estimated population of 1,250,000 inhabitants.

In September 1961 the fourth coverage was begun, consisting of two yearly sprayings with DDT and covering 140,000 houses.

Epidemiological evaluation operations have reached the optimum level and reveal that malaria has decreased notably throughout the country. There are 1,600 notification posts cooperating in case-finding.

UNICEF and AID cooperate in this program.

Provision is made for one malariologist (2 in 1962), one sanitary engineer, and four sanitarians as well as for supplies and equipment and, in 1962, for fellowships.

BOLIVIA-5, Nursing Education (See page 210)

The National School of Nursing, with which WHO nurse educators have been collaborating since 1953, is now providing the standard of instruction in nursing education considered necessary by the Government of Bolivia. Thus, it has been possible to improve considerably the level of theoretical and practical instruction given to student nurses.

In 1962 it is hoped to incorporate this School in the University of San Andres at La Paz.

A gradual increase in the size of the faculty and its continued training in future years has been studied.

Although the principles and methods of supervision and administration now form part of the curriculum a number of graduate nurses from previous years did not receive this type of training and the School therefore gives supplementary courses in these subjects to those graduate nurses. Moreover, the School has continued to assist other schools of nursing in the country in order to raise the level of the instruction they provide.

Provision is made for one nurse educator, fellowships, and a limited amount of supplies and equipment.

BOLIVIA-10, National Health Services (See page 210)

The aim of this program is to promote the gradual improvement of public health services in the country. It was begun in 1955 with the reorganization of the Ministry of Public Health, which was completed in 1960. The National Health Services has been established, and other

health agencies dispersed throughout various other ministries have been incorporated into it. The organization and establishment of local services have now begun, and the country has been divided into three health areas. A ten-year health plan has been prepared and incorporated into the national plan for economic and social development.

In addition to the advisory services provided for developing the health services, provision is made in 1963 for a nurse to cooperate in the tuberculosis control campaign, assistance to which is also given by the Zone consultant in tuberculosis.

Provision is made for a chief medical adviser, one sanitary engineer, two nurses, and for fellowships.

BOLIVIA-11, Joint Field Mission on Indigenous Populations (See page 210)

The aim of this program is to accelerate the natural development of the peoples of the Andean Region of Bolivia and to integrate them socially and economically into the national life. ILO, FAO, UNESCO and the Organization are cooperating with the Government in this program.

During the period 1954-1958, three health centers were established in the highlands: Pillapi (Department of La Paz); Playa Verde (Department of Oruro); and Otavi (Department of Potosí). In Otavi, the community has built a small hospital which is expected to go into operation in 1962. A health center was also opened in Cotoca (Department of Santa Cruz de la Sierra) for the transfer of indigenous population groups from the highlands which have poor soil and are over-populated to lower regions which are fertile and sparsely populated. In 1960 these centers, which formerly came under the SCISP, were incorporated into the National Health Service.

UNICEF is assisting this program by furnishing medical supplies and equipment for intensifying the rural sanitation activities. Beginning in 1962 UNICEF will also cooperate in a program of nutrition education.

Provision is made for the continuation of the services of a medical officer, who also provides services to the Peruvian program. From 1963 it is expected to cover also the Andean areas of northern Argentina and northern Chile. In 1964 fellowships will be provided. The engineer and the nurse from project Bolivia-10 also cooperate in this project.

BOLIVIA-15, Promotion of Community Water Supplies (See page 210)

Owing to their rapid growth, antiquated installations, and deficient water sources and distribution networks, most of the important cities in Bolivia lack sufficient water.

The Government has approved the establishment of an autonomous agency for the administration, construction, and operation of water supply services. This agency is now in the process of being organized and therefore requires considerable advisory assistance.



Provision is made for one sanitary engineer and for short-term consultants to assist in the national organization and preparation of plans and projects for the new water supply systems and for the expansion of existing ones.

BOLIVIA-17, Nutrition (See page 212)

The Organization is cooperating with the Interdepartmental Committee on Nutrition for National Defense in a nutrition survey in Bolivia through provision of staff services. The Committee is meeting travel and certain personnel costs.

COLOMBIA

COLOMBIA-4, National Health Services (See page 212)

The purpose of this project is to cooperate in strengthening health services at all levels of government. It began with the reorganization by stages of the Ministry of Public Health and with the development of regional and local health services in five departments of the country. The organization of the Ministry is now serving as a model for coordination for other ministries and local health services are to be extended to all departments. Thirty-two health centers are now operating in fourteen departments.

Training of personnel continues to be emphasized. Since 1957, 48 physicians, 5 dentists, 1 veterinarian, 77 nurses, 55 sanitation supervisors, 148 sanitary inspectors and 164 nursing auxiliaries have received training.

Five rural water supply systems and one treatment plant have been constructed. Nine shops produced 4,600 latrines in 1960. In 1962 and 1963 it is planned to dig about 850 wells and build about 35 water supply systems.

This project now encompasses improvements in collection of biostatistical information as well as cooperation in the tuberculosis control program. In the latter, a plan for participation of the Government, the Organization and UNICEF is being prepared.

Provision is made for a chief country adviser, two medical officers (one of whom is a tuberculosis specialist), two sanitary engineers, two public health nurses, and one statistician. In 1963 and 1964 fellowships are also provided.

COLOMBIA-5, Malaria Eradication (See page 212)

The malarious area of Colombia covers 90 per cent of the country and contains a population of 10 millions.

In October 1961 the fourth coverage of the country was begun with two spraying cycles a year with DDT and provided for the spraying of 900,000 dwellings.

Epidemiological evaluation operations have reached a satisfactory level and reveal a reduction in malaria in most of the country. There are 8,900 notification posts engaged in case-finding.

UNICEF and AID have contributed supplies and equipment.

Provision is made for two malariologists, one sanitary engineer, one statistician, one entomologist, and six sanitarians, as well as for supplies, equipment, and fellowships.

COLOMBIA-17, Smallpox Eradication

(No budgetary provision - advice of regular staff only)

From late 1955 until April 1962, the Government has been carrying on an intensive smallpox vaccination campaign with the technical advice of the Organization. Over 11 million persons or more than 80 per cent of the population have been vaccinated. Since November 1961 there has not been a single case of smallpox in the country.

The program is now entering the consolidation phase, and the proper steps have been taken to continue vaccination so as to maintain a satisfactory level of immunity.

The Organization will continue to provide advice to the Government through the personnel of the Zone and of project Colombia-4.

COLOMBIA-19, Leprosy Control (See page 212)

It is estimated that there are about 15,000 people suffering from leprosy in Colombia, a figure which would represent a prevalence of 1.1 per 1,000 inhabitants.

In 1958 a consultant of the Organization formulated recommendations for reorganizing the Leprosy Service. Another consultant, assigned in 1960, has collaborated in the preparation of a national control program for which UNICEF assistance has been given.

The national program gained impetus in 1961 with training of medical personnel in modern techniques of diagnosis, treatment and prevention. New anti-leprosy dispensaries have been opened in Monteria and Medellin and steps taken to increase the effectiveness of the old ones. Case-finding is improving and examinations of contacts are more frequent. BCG vaccine is being used to protect contacts.

Provision is made for a medical officer, and, in 1964, fellowships are provided.

COLOMBIA-21 (PAHO), COLOMBIA-200 (WHO), Fellowships for Health Services (See page 214)

Provision is made in for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

COLOMBIA-22, Aedes aegypti Eradication

(No budgetary provision - advice of regular staff only)

Eradication of *Aedes aegypti* has been achieved in the entire territory with the exception of the city of Cucuta, where foci of the vector have reappeared twice after long periods of negativity.

The Government, in agreement with the Organization, will carry out a complete survey of the city, and the necessary personnel and funds have been allocated for this purpose.

The Organization will provide assistance through the personnel assigned to other projects.

COLOMBIA-24, School of Public Health (See page 214)

As part of the program of reorganization of public health services in Colombia, the School of Hygiene of the Ministry was transferred to the National University of Colombia, and the School of Public Health was created in Bogota.

The faculty has been strengthened through the appointment in 1960 of one director and five full-time professors. At the present time the School provides courses for public health specialists, graduate nurses, and sanitary supervisors and inspectors. Cooperation is given to the School of Medicine in courses on microbiology, preventive medicine, statistics, and nutrition.

For three years up to 1961, the Organization furnished the services of a consultant in microbiology, who in 1962 was replaced by a professor in public health administration, assistance in that subject being one of the most pressing needs of the School.

Provision is made also for a nurse educator and for fellowships.

COLOMBIA-25, Promotion of Community Water Supplies  
(See page 214)

The Institute of Municipal Development in Colombia is the national agency legally responsible for promoting plans for the construction and expansion of the community water supply services in the country. At the request of the Government, the Organization has assigned a full-time consultant to the Institute to assist in designing water supply services, and has also provided the services of short-term consultants. With the aid of these consultants, the study on improving and expanding the water supply and sewage disposal services of the city of Cucuta was completed, and the Inter-American Development Bank subsequently approved a loan to finance that project. The studies and plans to provide water supply and expand existing services are well under way for a series of important cities. The Development Institute has prepared a plan to provide water supplies to all cities with over 5,000 inhabitants.

Provision is made for one consultant in water supplies. A second consultant in sanitary engineering is to be assigned in 1963.

COLOMBIA-26, Nutrition

(No budgetary provision - advice of regular staff only)

The Government with the collaboration of FAO, UNICEF, and WHO is undertaking a project to improve the level of nutrition in the Departments of Norte de Santander and Cauca, mainly in rural areas, in co-ordination with the integrated health projects in these Departments.

In 1962 and 1963 training of local personnel will be carried out in 632 schools; 107 schools will be provided with food demonstration services; and 80 schools will have school gardens and water services provided. A demonstration farm will be operated for educational purposes and as a source of food for distribution to schools. Later, additional schools will be added to the project.

Consultant services are available from the Zone Nutrition Adviser.

COLOMBIA-27, Preventive Dentistry

(No budgetary provision - advice of regular staff only)

The Ministry of Public Health, the University of Antioquia, the W.K. Kellogg Foundation, and the Organization have agreed to establish a Department of Preventive and Social Dentistry at the University. The Department's principal purpose is to teach the social and public health aspects of dentistry, to serve as a field of demonstration for other faculties and as a training center for teachers of preventive dentistry of other universities, and to constitute a research center in these subjects.

The Kellogg Foundation has undertaken to provide supplies and equipment, as well as funds to supplement the salary of certain staff members for five years. The Organization in 1964 will provide a certain amount of teaching material and equipment, short-term consultants, and fellowships. The regional consultant will assist this project.

COLOMBIA-52, National Institute of Health (Carlos Finlay)  
(See page 214)

The National Institute of Health was created in 1961 by combining various diagnostic and production laboratories, including the Carlos Finlay Institute, which prepares and provides the countries of the hemisphere with yellow fever vaccine gratis. It also makes serological tests, histopathological examinations, and ecologic and epidemiological studies.

In accordance with a resolution of the Directing Council in 1947, the Organization has been assisting the Institute by giving an annual subsidy to its yellow fever department.

Provision is made for continuing the subsidy.

ECUADOR

ECUADOR-4, National Health Services (See page 214)

This project was begun in 1953 as a maternal and child health program, with the assistance of the Organization and UNICEF. A Division of Maternal and Child Health and eleven rural centers were established. Since 1956 the scope of the program has been broadened to include the reorganization of the national health services by stages. In 1959, the Division of Sanitation was created and, in 1960, the Division of Epidemiology. Training courses were given for both professional and auxiliary personnel.

It is planned to establish a pilot center that will include the local preventive and medical services of a province.

Provision is made for a medical consultant and a public health nurse, and for fellowships for training national personnel in public health administration. Provision is also made beginning in 1963 for one sanitary engineer and for another medical officer in 1964.

ECUADOR-11, National Institute of Health (See page 216)

During the period 1952-1956, the Organization provided advice to the Leopoldo Izquieta Pérez National Institute of Health, through various consultants, and thus made it possible to extend and improve its services, particularly in the production of vaccines and biological products.

At the end of 1957, a study was made of a complete reorganization of the Institute on the basis of employing full-time personnel; but unfortunately it was not possible to carry out this plan because of various organizational problems. The Government has indicated that it would be most advantageous to have an adviser on the administration of public health laboratories.

Provision is made for a laboratory adviser in 1962 and for short-term consultants in 1963 and 1964, as well as for fellowships to train personnel for the Institute.

ECUADOR-14, Malaria Eradication (See page 216)

The malarious area of Ecuador covers 75 per cent of the country and has 2,200,000 inhabitants.

The second total coverage with semi-annual sprayings with DDT is to be made in 1962 and will cover 420,000 dwellings.

Evaluation operations have reached a satisfactory level and reveal a decrease in malaria in several areas of the country. There are 2,600 notification posts engaged in case finding.

UNICEF and AID cooperate in this project.

Provision is made for two malariologists, one sanitary engineer, one entomologist, and four sanitarians, as well as for supplies, equipment, and fellowships.

ECUADOR-16, Nursing Education (See page 216)

The aim of this project has been to expand and modernize the teaching given at the School of Nursing in Ecuador in order to provide the country with more and better qualified nurses.

Since 1957 the Organization has provided nurse educators to give advice in this field. The School has considerably improved the level of theoretical and practical instruction given to student nurses.

The teaching body, which is composed of nurse instructors in various specialities, also received in-service training, and three of them received fellowships for supplementary training.

Special attention is being paid to clinical practice. Supplementary training in administration and supervision is also being provided for graduate nurses who did not receive training in these subjects during their basic course.

Provision is made for a nurse educator, for fellowships, and for a limited amount of supplies and equipment.

ECUADOR-19, PAHO Fellowships for Health Services  
(See page 216)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement of expansion of its health services.

ECUADOR-20, Smallpox Eradication (See page 216)

In 1957 the Government and the Organization agreed on a national program of smallpox eradication through vaccination of 80 per cent of the population within five years. The house-to-house campaign began in 1958 and by the end of 1961 a total of 1,805,621 persons had been vaccinated.

Early administrative and legal problems are being resolved and the campaign is expected to be completed within the time originally foreseen.

Provision is made for one medical officer for three years and for two sanitarians through 1963 to cooperate further in the development and evaluation of the campaign. In addition, in 1962 supplies and equipment are being provided.

ECUADOR-21, Promotion of Community Water Supplies  
(See page 218)

As in the other countries of the Americas, Ecuador has serious water supply problems in its urban areas, and it is foreseen that extensive advisory services in this regard will be required. In particular, the Government has requested assistance for the expansion of water supply in the city of Quito.

Provision is made for one sanitary engineer and for short-term consultants.

ECUADOR-22, Joint Field Mission on Indigenous Populations  
(No budgetary provision - advice of regular staff only)

The aim of this program is to promote the development of the peoples of the Andean region and to assimilate them into the social and economic life of the country. It is also proposed to extend social security benefits to the rural population, and to expand or establish such services where necessary.

ILO, FAO, UNESCO, UNICEF, and WHO are collaborating with the Government in this project.

The Organization will provide advisory services on health aspects through staff assigned to other programs.

ECUADOR-23, Health Planning (See page 218)

Under the Charter of Punta del Este, the Government of Ecuador is preparing a plan for the economic and social development of the country. An adviser in health planning is being made available in 1962 to help in the preparation of a national health plan as a component of the national plan for development.

ECUADOR-53, National Institute of Nutrition (See page 218)

The Organization has cooperated with the National Institute of Nutrition of Ecuador since 1950. During this time the Institute has organized a bromatological laboratory and has made numerous dietary surveys; clinical nutrition activities have been implemented; a nutrition section has been organized in Guayaquil; and an intensive program of nutrition education has been carried out at all levels.

Advisory services are available from the nutrition adviser assigned to the regional project (AMRO-262).

In addition, the Institute receives grants through the Organization from various sources to carry out research projects. Provision is made for anticipated grants to be made available to the Institute.

PERUPERU-5, Malaria Eradication (See page 218)

The malarious area of Peru is composed of two regions, one on each side of the Andean cordillera, known as the "Vertiente Occidental" (Western Slope) and the "Vertiente Oriental" (Eastern Slope) which contains the Amazon jungle. The malarious area covers 65 per cent of the country and is inhabited by 3,100,000 persons.

The project is being carried out by stages, and each slope has different spraying cycles. The "Vertiente Occidental" is now in the consolidation phase; the "Vertiente Oriental", in the fourth year of the attack phase; and the Amazon jungle, in the third year. In 1962 it is expected that 260,000 dwellings, 25 per cent of which are situated on the Western Slope and 75 per cent on the Eastern, will be sprayed twice.

Evaluation operations have reached a high level and reveal a very low malaria incidence on the Western Slope and a decreasing level on the Eastern Slope. There are 8,400 notification posts engaged in case-finding.

UNICEF contributes supplies and equipment to this project.

Provision is made for one malariologist, one sanitary engineer, and five sanitarians, for supplies and equipment, and for fellowships.

PERU-15, Nursing Education (See page 218)

Since this project was initiated in 1959 with one WHO nurse instructor, the National Institute of Postgraduate Nursing has conducted two annual nine-month courses,

one in administration and the other in nursing education. As a result of the work accomplished in the first two years, 32 nurses graduated in administration and 20 in nursing education. The majority of these are attached to the nursing services of the country and hold positions for which they were trained in the courses described above.

In 1962 it is planned to continue these courses, and to conduct short courses for nurses who cannot leave their posts for long periods of time.

Moreover, greater attention will be given to the study and reorganization of the curricula of basic nursing schools and to the development of new schools.

Provision is made for a nurse educator and for fellowships, as well as, in 1962, for some supplies and equipment.

PERU-22, National Health Services (See page 220)

This project has as its objective the strengthening of planning, evaluation, and coordination of health services at both national and local levels of government. Between 1958 and 1960 the Organization collaborated in the reorganization of the Ministry of Public Health and in the organization of health areas. Organization of three remaining areas is planned and particular attention will be given to strengthening the Junin health area.

The Junin part of the project now encompasses training of professional and auxiliary personnel, integration and regionalization of preventive services, creation of new services, and rural and urban sanitation. UNICEF participates in the project.

Provision is made for a chief country adviser, a sanitary engineer and a public health nurse. In 1963 and 1964 there will also be a second medical officer and provision for fellowships.

PERU-23, Joint Field Mission on Indigenous Populations (See page 220)

The aim of this program is to accelerate the natural development of the indigenous peoples of the Andean region of Peru and to integrate them socially and economically into national life.

This program is carried out by the Government with collaboration of ILO, FAO, UNICEF, UNESCO, and PAHO/WHO. Its activities include, in addition to health, various aspects of agriculture, stock raising, rural welfare, handicrafts, and basic education.

Centers have been established in the communities of Camicachi, Chucuito, and Taraco in the Department of Puno. In 1961 the health centers of these communities passed from the Ministry of Labor to the Ministry of Health. In this way it has been possible to integrate them into the health services of the area.

The activities of this program have also been extended to the region of Tambopate, a low-lying area to which it is expected that there will be a considerable migration of population from the highland area.

Provision is made for travel for the medical, nursing, and engineering consultants of projects Bolivia-11 and Bolivia-10 to cooperate in this project.

PERU-25, PAHO Fellowships for Health Services  
(See page 220)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

PERU-30, Promotion of Community Water Supplies  
(See page 220)

There has been considerable interest in Peru in promoting programs for the improvement and expansion of community water supply and sewage disposal systems, and a National Committee has been established to this end. A draft law on the establishment of a National Corporation of Sanitary Works was prepared and submitted to the Congress. That autonomous institution would be in charge of planning, constructing, operating, and administering water supply and sewage disposal services.

A complete technical and financial study was made with the assistance of the Organization with a view to improving and expanding the water supply and sewage disposal systems of Arequipa, for which a loan was obtained from the Inter-American Development Bank.

Through the award of fellowships for study abroad, training was given in water supply administration, rates, and financing to sanitary engineers. It is proposed to continue these activities.

Provision is made for two long-term consultants in engineering and fiscal aspects, as well as for fellowships to continue assistance to this project.

PERU-32, Infantile Diarrhea and Malnutrition  
(See page 220)

The United States Public Health Service - National Institutes of Health is supporting a study on the nature of the alterations in water and electrolyte metabolism in infants suffering from diarrhea and malnutrition, in an effort to find methods of treatment which can be used in areas where laboratory and hospital facilities are minimal or non-existent.

The Organization makes available the research funds for the costs of personal services, supplies, equipment, and duty travel in connection with this project.

INTERCOUNTRY PROGRAMS

AMRO-119, Malaria Technical Advisory Services (Zone IV)  
(See page 222)

The aim of this program is to provide advisory services on special aspects of malaria eradication in the countries of Zone IV, in addition to the services given to individual malaria eradication programs in each country. A further aim is to coordinate the activities of all malaria eradication programs in Zone IV.

Provision is made for one sanitary engineer through 1964, and for two administrative methods officers and one entomologist until the end of 1962.

AMRO-143, Health Statistics (Zone IV) (See page 222)

This program was established in order to advise the countries of the Zone on improving their vital and health statistics, especially as regards the reporting of communicable diseases; to provide personnel training by conducting courses and awarding fellowships; and to advise on the statistical aspects of the public health programs being developed in cooperation with the Organization.

The consultant has visited most of the medical schools of the countries of the Zone, interesting professors of hygiene in including or developing the teaching of statistics. The Government of Bolivia has enacted a decree making it compulsory to use the International Medical Certificate of the Cause of Death. The countries have been encouraged to study the proposals and formulate recommendations for the seventh revision of the International Statistical Classification of Diseases, Injuries, and Causes of Death. A Subcommittee was established in Lima for this purpose, and in Bogotá the National Committee on Vital Statistics handled the matter. The Latin American Center for the Classification of Diseases conducted short courses in Colombia on this subject. Lima, Bogotá, and Cali are participating in the inter-American program on mortality statistics.

Provision is made for a statistician.

AMRO-179, Veterinary Public Health (Zone IV) (See page 222)

The public health veterinarian assigned to this project provides advice and assistance to the countries of the Zone in developing and reorganizing veterinary public health activities and services, especially those relating to the zoonoses and the protection and control of foodstuffs, as well as in promoting the teaching of veterinary public health.

The Government of Colombia has requested assistance in dealing with the problem of food control in Bogotá. It is expected to conduct a course on food hygiene at the School of Public Health in Bogotá in 1962. A food control project in Lima is being examined.

Rabies control programs have been developed in Lima (Peru), Cali, Medellín, and Bogotá (Colombia) and in Guayaquil (Ecuador).

Provision is made for a public health veterinarian.

AMRO-207, Sanitary Engineering (Zone IV) (See page 222)

Environmental sanitation problems continue to have high priority in the countries of Zone IV. There is an urgent need for water supply and sewage disposal services in both urban and rural areas. Also housing, food control, vector control, industrial hygiene, industrial waste disposal, garbage disposal, air pollution are acquiring sufficient importance to require detailed attention on the part of the Governments and of the Organization.

The sanitary engineer assigned to this program will provide advisory services to the Governments, through the individual country projects where applicable, on all matters relating to the technical, administrative, and financial aspects of environmental sanitation, including the preparation of plans and projects to execute these programs. He will also coordinate and supervise the work of the Organization's engineers stationed in the countries.

Provision is made for one sanitary engineer and one clerk stenographer (1963 and 1964), and for fellowships. In addition, provision is made for fellowships and equipment for the community water supply program.

AMRO-262, Nutrition Advisory Services (Zone IV)  
(See page 222)

The purpose of this project is to assist countries of the Zone (a) to collect information on nutritional problems and to assess needs; (b) to plan short-term and long-term national nutrition programs, in close cooperation with FAO on agricultural and economic aspects, and also with UNICEF, particular attention being given to the integration of nutrition program into public health services at all levels; (c) to plan and organize education in nutrition program adapted to local conditions; (d) to collaborate with FAO and UNICEF in programs for the production of high protein foods, other than milk, especially for pregnant women, nursing mothers, and children; (e) to evaluate nutrition projects; (f) to organize courses, seminars, and other training activities.

The Organization has been assisting the National Institute of Nutrition of Ecuador since 1950 and providing it with technical advisory services and with equipment. First, a bromatological laboratory was set up, and then work in clinical nutrition and in public health, with special emphasis on education, was undertaken.

A study is being made in Colombia of the feasibility of carrying out an expanded nutrition program in cooperation with UNICEF and FAO.

Provision is made for a nutrition adviser.

AMRO-263, Leprosy Control (Zone IV) (See page 224)

In 1960 a consultant of the Organization visited Bolivia, Ecuador, and Peru in order to ascertain the magnitude of the leprosy problem in each country. His report and his conclusions and recommendations on the initiation of leprosy control campaigns have been submitted to the Governments concerned.

A consultant specialized in leprosy has been assigned and on the basis of these surveys will cooperate with the Governments in the planning and implementation of leprosy control programs.

Provision is made for the above-mentioned consultant in 1962 and for other short-term consultants in 1963 and 1964.

AMRO-292, Nursing (Zone IV) (See page 224)

The Nurse Adviser assigned to Zone IV will assist with the following activities in all countries of the Zone: (1) technical guidance of nurses stationed in

in country projects; and (2) cooperation with national departments of health to determine nursing and midwifery needs and resource; to plan programs for public health and hospital nursing, midwifery services, and nursing education; to develop these professions in order that they may provide optimum services adapted to changing health needs; and to evaluate nursing and midwifery programs.

The Nurse Adviser will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

Major areas of service to Ministries of Health will be the strengthening of nursing and midwifery services and the training of personnel for these services.

Provision is made for a nurse and a clerk stenographer beginning in 1963.

AMRO-316, Tuberculosis Control (Zone IV)  
(See page 224)

This project (formerly identified as Peru-29) was originally intended to assist only the tuberculosis program in Peru, but is now being expanded to assist Bolivia, Ecuador and Colombia as well.

The Peruvian tuberculosis project, about to begin, is to consist of a pilot area center at Tacna, with case-finding, ambulant treatment and prophylaxis combined with a prevalence study of the area. A Bolivian tuberculosis project of similar content, and located to serve communities bordering Lake Titicaca, has already been drawn up. A similar pilot area project is anticipated in Ecuador.

A tuberculosis specialist and a public health nurse will be engaged to serve as full-time consultants to the tuberculosis programs of the countries in the Zone IV. Fellowships for training will also be provided.

AMRO-317, Medical Care (Zone IV) (See page 224)

The integration of medical care services into the health services, particularly preventive medicine services, has high priority owing to the magnitude of the problem of medical care in Latin America. Also, better use of existing hospital beds through better administration and utilization of out-patient clinics is especially related to the costs of maintenance of the services in general.

The countries of Zone IV are interested in advice on integrating medical care services into their general programs and in strengthening and improving their hospital administration and organization.

Provision is made for consultant in 1963 and 1964 for the four countries of the Zone.

AMRO-318, Planning (Zone IV)  
(See page 224)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises governments on request on the preparation and execution of national health plans as components of national plans for social and economic development. Consultants will also render

advisory services to the governments on the organization of planning units within Ministries of Health.

Upon request by countries, brief courses regarding principles and techniques of planning will be developed to orient key personnel of national health services.

Provision is made in 1963 and 1964 for short-term consultants and the award of fellowships in 1964.

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Zone Office (See page 226)

For text see "Zone Offices," page 39.

BRAZILBRAZIL-3, Health Services in Nine Northeastern States  
(See page 226)

The public health services in Brazil are constantly evolving. The areas having the greatest difficulty in reaching the degree of development sufficient to permit the organization of adequate health services to meet the needs of the population are the northeastern and northern part of the country.

UNICEF and the Organization are at present cooperating in the establishment of a program covering either the complete area or an important part of several states.

It is now necessary to improve existing services, to establish them in municipalities that lack them, and to devise systems of supervision at the regional level, as well as to reorganize the state public health services so that they may be in a position to exercise control and supervision over the projects conducted in their territories.

The difficulties in accomplishing this program spring basically from the lack of sufficient trained personnel at the various levels, ranging from professional public health workers for the execution of the programs to auxiliary personnel of all types for performing the peripheral services. Another problem is the achievement of better coordination among the state and federal services and private institutions. The purpose of this coordination is to concentrate efforts, avoid duplication, and establish a health policy that takes account of the real priorities and true possibilities for developing the activities. It will also make it possible to make better use of the resources available from different sources.

The project was begun in the State of Rio Grande do Norte, then in Sergipe and Piauí and, in 1961, in Pernambuco State. From 1962 onwards the remaining States that is Ceará, Paraíba, Alagoas, Maranhão, and part of Bahia State will be incorporated into the program.

Coordination between the Ministry of Health, SCISP, WHO, PAHO, and UNICEF is effected at the central level. At the state level, coordination is effected between the Department of Public Health, the representatives of federal, state and private agencies participating in the programs, and the international agencies (WHO, PAHO, and UNICEF). Educational programs are planned to train staff required for existing services as well as for services to be established.

Provision is made for a medical officer, a statistician, and fellowships and in 1964, for a second medical officer.

BRAZIL-7, Nutrition (Rio Grande do Norte) (See page 226)

The northeast of Brazil is a region which has not developed at the same pace as the other regions of Brazil.

Among the many problems present, malnutrition is outstanding in certain areas and groups. In 1959 a FAO/WHO survey showed that the most common nutritional disorder found in the area is calorie-protein deficiency which affects mainly children under 4 years of age and pregnant women and nursing mothers. Several organizations from the Ministries of Health, Agriculture, Education and Labor and several private organizations have come together at the national level as well as at the local level at the State of Rio Grande do Norte and have requested the cooperation of FAO, WHO and UNICEF to assist in a project of nutrition education and correlated activities to be developed first in the State of Rio Grande do Norte. Assistance will be given to this project by UNICEF and FAO in their respective fields.

The Organization will provide technical assistance through a regional nutrition consultant and through provision of fellowships for training nutritionists.

BRAZIL-8, National Virus Laboratory Services (See page 228)

The Oswaldo Cruz Institute has been one of the main centers of laboratory research and vaccine production for the Government of Brazil. It has also been and is being used extensively to train laboratory personnel from all parts of the country.

In order to improve the diagnostic, research and vaccine production facilities, the Government has requested cooperation in the establishment of a virus diagnostic laboratory, in virus research activities and in the production of needed virus vaccines.

During 1961, laboratory facilities were completed and three national virologists and the corresponding auxiliary personnel were working there regularly. Routine work is being organized and several research projects are in operation. The laboratory has actively participated in the polio vaccination campaign currently being carried on in the larger cities of the country. Training courses will begin in 1962 and it is expected that facilities will be ready for an international course in basic virology and tissue culture techniques in 1963.

Provision is made for a virologist to cooperate in this work. In 1963 and 1964 fellowships are also provided.

BRAZIL-18, National Food and Drug Service  
(See page 228)

In January 1961 an Executive Decree was enacted under the name of "National Health Code" establishing "general standards for health protection". This Decree transformed the Central Laboratory for the Control of Drugs and Medicinal Products into the Central Laboratory for the Control of Drugs, Medicinal Products, and Foods, by assigning bromatological activities to it. In this way the Government assigned to a single agency the responsibility for the national control not only of drugs and medicinal products, but also of foods.

The collaboration of the Organization in this project began in 1957 when technical advisory services were provided



for the organization and installation of the Laboratory, the selection of the necessary equipment, and the training of personnel. Assistance was provided in 1958 in the study and preparation of legislation combining drug and medicinal products control with food control. During 1959, 1960, and 1961, the Organization awarded fellowships for training technical personnel in various disciplines. At the beginning of 1962 the Laboratory was preparing to expand its installations and add the necessary facilities for food control.

The new functions, particularly food control, make it necessary to increase the collaboration of the Organization in this field.

Provision is made for fellowships each year and for short-term consultants in 1962 and 1963.

BRAZIL-19, School of Public Health (Rio de Janeiro)  
(See page 228)

Facilities for professional education in public health are available in Brazil at the School of Hygiene and Public Health of the University of Sao Paulo, which has national and international status. This School cannot, however, meet all the national training needs for a country as large as Brazil.

During 1959 the National School of Public Health was organized to give basic courses for professional and non professional workers and special courses in different fields. By Presidential Decree 50,598, the conditions for accreditation of the School were established. The curriculum will serve as the prototype for all Brazilian schools and a representative of the School's council will be a member of the Accreditation Committee to be appointed by the Ministry of Health.

The Organization has provided the services of a consultant to assist in a review of the curriculum and in the organization of the School, and has also provided additions to the library.

Provision is made for consultant services, fellowships and training supplies.

BRAZIL-24, Malaria Eradication (See page 228)

The malaria eradication program of Brazil is the largest and most complex in the Americas. Eighty five per cent of the total area of the country is within the malarious area where about 30 million people live. Extensive control work has reduced the incidence of malaria and in some areas has practically interrupted its transmission. The lack of a follow-up of an adequate control work in areas not yet covered by malaria eradication procedures has created the necessary conditions for a return of higher incidences of malaria that have been acutely felt during 1961 in many areas.

To eradicate malaria from the country the control program was converted by stages into a National Eradication Program. Agreements were signed in 1958 with the Organization and AID for assistance. Spraying operations started in 1959 in the Northeastern states and, in the same year, a program using chloroquinolone salt was initiated in the Amazon area. Because of financial and technical difficulties, a complete revision of the program was made in 1961 introducing considerable changes in its administration

and in the plan to be followed. An emergency program was budgeted for 1962 that would allow recuperation of part of the lost time in such a way that it is expected that by 1964 the whole country will be covered by malaria eradication operations. To avoid lack of coordination between control and eradication operations, all malaria activities have been put under one authority.

Provision is made for one chief country malaria adviser, four medical malariologists, three sanitary engineers, one administrative methods consultant and three sanitarians. Funds are also provided for antimalaria drugs and a small amount of laboratory equipment and for fellowships.

BRAZIL-28, PAHO Fellowships for Health Services  
(See page 230)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its public health services.

BRAZIL-35, School of Public Health in Sao Paulo  
(See page 230)

The School of Hygiene and Public Health of Sao Paulo, for a number of years, not only served as a training center for Brazilian but also, in an ever increasing degree, as an international training center. In addition to courses in hospital administration, dental public health and veterinary public health, which have been developed in recent years, a course in public health nursing was added in 1959. The Araraquara Health Unit which serves as a field training center of the Faculty of Hygiene is also administered by the University of Sao Paulo.

The Faculty of Hygiene is now studying the curriculum and teaching methods used, to adapt them to the new needs and changing patterns of public health in the Hemisphere.

Provision is made for short-term consultants, fellowships, teaching supplies and equipment and a grant each year to cover administrative expenses of the School for PAHO/WHO fellows.

BRAZIL-37, Dental Health Education (See page 230)

The Organization and the W.K. Kellogg Foundation are cooperating with the School of Hygiene and Public Health of the University of Sao Paulo in the development of a training program in public health dentistry in order to help meet the need for adequately trained public health dentists to operate expanding public health dental services efficiently.

Since 1958 the Center has conducted specialized courses in Dental Public Health with students from different countries of Latin America. In 1961, the course was attended by 14 students from nine countries.

Since 1960 a short course for orientation in dental public health of supervisors and teachers has been offered. Beginning in 1962 this course will be for dental clinicians working at the local levels.

Assistance to this project in the form of advisory services will continue to be given by the regional dental adviser. Also, fellowships are provided for Faculty members.

BRAZIL-38, Smallpox Eradication (See page 230)

Under this project equipment has been provided for two strategically located laboratories for the production of dried smallpox vaccine to serve widely separated regions in the extreme north and south of Brazil - Recife and Porto Alegre. A third laboratory, the Oswaldo Cruz Institute has been provided with equipment to enable it to produce 15 million doses of lyophilized vaccine per year. This amount added to the production of the other laboratories should ensure sufficient vaccine for the nationwide eradication campaign that the Ministry of Health has planned to start in 1962.

The Oswaldo Cruz Institute is the central production laboratory and also serves as a training center for the personnel of other laboratories in the country.

The urban population is vaccinated with the standard glycerinated vaccine and the rural population is to be vaccinated through coordinated campaigns in various regions of the country using the dried vaccine.

Fellowships are provided in 1962 and 1963 for officers in charge of vaccination campaigns in different areas of the country. Advisory services as needed are being provided by the regular staff of the Organization or through AMRO-60. In addition supplies imported for the maintenance of equipment and laboratory materials, drugs and culture media not available in the country are provided in 1963 and 1964.

BRAZIL-39, Health Services (Mato Grosso) (See page 230)

The state of Mato Grosso covers an area of 1,254,821 square kilometers, extending to the North through tropical zones of the Amazon Valley and to the South through relatively temperate zones where 500,000 of the 600,000 inhabitants live. There has been a rapid immigration into this territory provoking a number of problems related to health and sanitation. In view of this, the district was selected for development of a program of integrated health services.

The State Government, with the technical orientation of the Organization, has developed a plan of operations for six municipalities (counties) comprising the Southern portion of the State.

Following agreement between the Ministry of Health, the State Government of Mato Grosso, UNICEF and the Organization, the project went into full operation during 1960 and several services were installed, starting with a central unit in Dourados and expanding to other districts in which health posts have been established.

Reorganization of the public health administration of the state of Mato Grosso is being studied and is expected to be put in operation in the near future.

Provision is made for one public health nurse, one public health engineer, and one medical officer, as well as for fellowships.

BRAZIL-41, Malaria Eradication (Sao Paulo) (See page 232)

The purpose of this project is to eradicate malaria from the state of Sao Paulo, as part of the program of

malaria eradication for the whole of Brazil. The program was started in 1958 with agreements signed by the State of Sao Paulo with the Federal program and PAHO. Spraying operations started January 30, 1960. At the end of 1961, the project was ready to complete the fourth cycle of spraying. Epidemiological operations began early in the program and have developed considerably during 1961. Thirty-eight laboratories were working at the end of 1961 receiving blood specimens from an extensive network of notification posts and from the field personnel of the program.

It is expected that the Malaria Eradication Campaign in the state of Sao Paulo will be able to achieve eradication within a reasonable period. It is also expected that the development of the National Campaign, particularly in the malarious areas of the bordering states, will facilitate the work in this project, eliminating a considerable number of imported cases that are regularly found in the epidemiological investigations.

The state program receives by agreement with the National Program materials and equipment supplied by AID.

Provision is made for one sanitary engineer and three sanitary inspectors. Funds are provided for antimalaria drugs, laboratory equipment and for fellowships.

BRAZIL-42, Rabies Control (See page 232)

Rabies is endemic and widespread throughout Brazil. The problem of canine rabies is concentrated in the more heavily populated centers. The number of positively diagnosed cases in dogs in Rio de Janeiro, for example, exceeds 1,000 per year. Thousands of persons are attended and treated for dog and other animal bites in the various clinics and institutes throughout the country.

Cattled rabies, which is strictly connected with the occurrence of infected bats in well defined areas of most states, is more of an agricultural than a public health problem. The vectors involved and probably other unknown natural sources of the infection serve as a constant reservoir of the disease.

Lack of information concerning the disease among the general population and the inadequacy of facilities for treatment of exposed humans have been contributing factors in the maintenance of an excessively high estimated death rate among humans.

The agreement signed in 1959 provides for a comprehensive attack on the problem of rabies in the country. Responsibility for laboratory control and research rests with the Oswaldo Cruz Institute while general prophylaxis comes under the direction of the National Department of Health. State programs will be coordinated in the Health Ministry.

Initial efforts are being directed towards the establishment of a central rabies reference laboratory and the production of safe, potent vaccine for human treatment. By undertaking surveys and formulation and distribution of guides for local control programs increased interest in the problem is anticipated.

In addition to technical assistance which will be provided by the zone veterinarian, provision is made for short-term consultants in 1962 and 1963 and for fellowships and supplies for 1962, 1963, and 1964.

BRAZIL-43, Teaching of Preventive Dentistry (See page 232)

To increase the scope of dental programs, it is essential that the private dental practitioners, many of whom are also part-time governmental workers, be well grounded in preventive methods, incorporating them into routine work. In some dental schools, the teaching of preventive dentistry has not been stressed sufficiently. The purpose of this project is to assist selected dental schools in reviewing their methods of teaching of preventive dentistry, integrating it within the over-all educational program.

Since 1958, the "Campanha de Aperfeiçoamento de Pessoal de Nível Superior", a Brazilian federal agency has been providing fellowships to teachers of hygiene in dental schools for study in the School of Hygiene and Public Health of Sao Paulo. The Organization assists selected schools, by providing advisory services, fellowships and a limited amount of teaching equipment and supplies in order that a group of schools may then serve as a nucleus for influencing the remaining dental schools.

Advisory services are provided by the Organization's regional dental advisor. Teaching equipment and supplies and fellowships will also be provided.

BRAZIL-44, Teaching of Public Health in Schools of Veterinary Medicine (See page 232)

Many zoonoses and food control problems exist in Brazil, as in other countries of the Americas. Progress toward the solution of these problems will depend to a great extent upon the awareness which the veterinary profession will have with respect to its role as member of the public health team.

The teaching of the fundamentals of preventive medicine and public health must take place in the veterinary schools themselves thus orienting all graduates in this broad and important field. Brazilian veterinary schools have moved quickly to make public health teaching a part of their curriculum. When the anticipated change to five-year courses actually takes place in 1963, all will have established chairs which include the teaching of public health principles.

Direct assistance in the planning and developing of courses and teaching methods is available to professors of veterinary schools by the zone veterinary public health advisor.

Provision is made for teaching aids and for fellowships.

BRAZIL-48, Leprosy Control (See page 234)

It is estimated that there are 90,000 cases of leprosy in Brazil, a prevalence of 2 per 1,000 for the country as a whole. It is also estimated that about 5,000 new cases are discovered every year. Practically all of the country is within the endemic area although the major concentration of cases are in the states of Sao Paulo, Minas Gerais, Parana, Rio Grande do Sul, Rio de Janeiro, Guanabara and in some areas of Maranhao, Pisui and Ceara.

The Ministry of Health has recently started a radical modification of the methods of controlling the disease with the purpose of carrying this work to all of the endemic

areas in the country-wide campaign. Assistance has been requested from UNICEF and from the Organization.

An extensive educational activity will be developed at all levels to modify the attitude of the public and even of some professional groups towards the problem of leprosy and make its control more in accordance with the newer concepts.

The Government is also interested in developing research activities. These activities will be carried on in the Institute of Leprology and other affiliated laboratories. During 1960 research consultant assisted in the preparation and development of this plan.

Provision is made for short-term consultants in 1962 and 1963 and for fellowships in 1962 and 1964.

BRAZIL-49, Promotion of Community Water Supplies (See page 234)

The problem of providing adequate water supplies to the many localities in Brazil that need it, is commensurate with the size of the country. In practically all the larger concentrations of population, the responsibility of the construction and maintenance of water supplies lies with the municipalities. In smaller urban centers, the municipalities may not be able to handle the problem by themselves, so other organizations, either at the federal or state level, will take the responsibility of the construction of water supply systems and to maintain or assist in the maintenance of same.

During 1961, a Training Course on Administration, Management and Financing of Water Supplies was held in Sao Paulo and it was attended by a sizable group of Brazilian engineers. As a consequence of this course and the possibilities now available of international assistance in the financing of the construction of water supply systems, many local Governments have become interested in solving their problems with loans to finance the operation. It is anticipated that assistance will be needed in documenting the requests for water supply loans.

Short-term consultants are provided to review the documentation prepared locally or to assist in its preparation.

BRAZIL-51, Yellow Fever Laboratory (See page 234)

The resource for producing yellow fever vaccine in Brazil and the long experience of the country with the disease led to the adoption of the Oswaldo Cruz Institute as a vaccine supply center for Brazil and other countries in the Americas in 1950. Since then it has provided the continent-wide campaign against yellow fever with serological and pathological diagnostic services and supplies of yellow fever vaccine.

In 1961, 2,648,800 doses of vaccine were produced. Aside from that used in Brazil, vaccine was also provided to Venezuela, Peru, Bolivia and Uruguay as well as a certain amount to Portugal. At the end of 1961, the stock in hand was 3,580,800. The Yellow Fever Laboratory continued to conduct the routine diagnostic work, not only for Brazil, but for other Latin American countries that requested this service.

Provision is made for the continuation of a grant to the Yellow Fever Laboratory to cover the cost of equipment, replacements and supplies not available in the country and the assistance of a yellow fever laboratory specialist.

BRAZIL-55, Tuberculosis Prevalence Survey

(No budgetary provision - advice of regular staff only)

The first phase of this project provides for a tuberculosis prevalence survey in 1962 in the State of Rio Grande do Norte, as a basis for planning a tuberculosis control project in the State which has a population of 1,200,000.

UNICEF provides transportable photofluoroscopic equipment, X-ray films and chemicals, laboratory equipment, tuberculin testing supplies, health education equipment and transport.

The Organization will provide advisory services of its regular staff and fellowships from its general fellowship program.

BRAZIL-59, Teaching of Preventive Medicine (University of Ceara) (See page 234)

In 1959 the University of Ceara created the Institute of Preventive Medicine. Its responsibilities include: research in the fields of preventive medicine and public health; operating a health center and other public health responsibilities for a pilot area in the city of Fortaleza; giving courses for the preparation of public health physicians, public health inspectors, microscopists, public health nurses and other auxiliary personnel, and providing field and laboratory practices.

The Organization cooperates in the development of a more adequate teaching of preventive medicine; assists in planning the most efficient use of facilities and developing the most adequate ones; and operates the practice fields.

Provision is made for a public health nurse with experience in training of auxiliary personnel to assist in the development of the practice areas within the pilot area and to integrate public health nursing activities in the teaching of preventive medicine. In addition, short-term consultants to help develop the teaching activities and curriculum, a small amount for teaching supplies and equipment, and fellowships for training the teaching staff are provided.

BRAZIL-60, Nursing Education (Recife) (See page 234)

The Recife School of Nursing, formerly under the Pernambuco State Health Department, has very recently been incorporated into the University of Recife. It is expected that the school will develop into a regional training center for northeastern Brazil.

The principal objectives of this project are: strengthening the faculty through advanced study and experience; reorganizing and improving fields for clinical experience in the city of Recife; strengthening the basic nursing curriculum through a more realistic approach to

health needs, better coordination of theory, and greater integration between theory and practice; developing short courses for the preparation of nurses already working in supervisory, administrative and teaching positions in the northeastern region; and, developing a year's post-graduate course with emphasis on maternal child health including training and supervision of birth attendants and on preparing nurses for supervisory, administrative or teaching positions in hospitals, public health services, schools of nursing and courses for auxiliaries.

Provision is made beginning in 1963 for fellowships for school faculty and hospital supervisors to obtain additional preparation and experience and for one nursing consultant to help organize and develop a nursing service department in the university hospital and improve clinical experience areas as well as guide faculty in the teaching and supervision of students. Short-term consultants are also provided in 1964.

BRAZIL-61, Nutrition Course for Physicians (Recife)

(See page 236)

The purpose of this project is to provide the necessary facilities for training of physicians and senior medical students to develop their interest in the general problems of nutrition and to give them an adequate preparation to understand and interpret nutrition activities integrated into general public health plans. The Institute of Physiology and Nutrition of the School of Medicine of the University of Recife is interested in providing this training through a 30 days' course that would be given every year.

The regional consultant in nutrition will assist in the training and development of these courses.

Beginning in 1963, a grant will be provided to assist in the establishment of the courses. Fellowships will also be provided in 1964 for further training of teaching staff.

BRAZIL-62, Nutrition Course for Public Health Professional Personnel (Sao Paulo) (See page 236)

A general policy aimed at adequate nutritional levels must be developed for local and national programs. An important part of this policy will be based on studies by specialized personnel but a no less important activity must be developed by public health officers, i.e., evaluation of nutritional problems of the areas in which they are working and integration of nutrition activities into the general public health program.

The Faculty of Hygiene and Public Health of Sao Paulo is developing facilities for training public health personnel in the evaluation of nutritional problems of the community and in the planning and developing of nutrition activities within general health programs. A two months' course is to be organized in which 20 Brazilian candidates are to be trained, as well as students from other countries. The course is to be repeated every two years.

Provision is made for a grant in 1964 for assistance with the course.

BRAZIL-63, Training of Nursing Auxiliaries (See page 236)

Starting in 1962, a regulation in the nursing education law (Law No. 775 of 6/8/1949 - Article 5) makes it mandatory that schools of nursing admit only students with a minimum of complete secondary education, automatically terminating the previous "ginasio" minimum permitted. It is expected that some of the nursing schools will not be able to meet this requirement for several years and will convert to schools for nursing auxiliaries. In the meantime Brazil plans to strengthen those schools of nursing able to carry out a professional level program as well as to concentrate on the training of nursing auxiliaries so that urgent needs for nursing services in hospitals, maternities, and public health units may more rapidly be met.

Least favored in nursing resources are the North and Northeast regions. There are only eight schools of nursing and eleven courses for nursing auxiliaries in this vast territory, preparing an annual total average of only 66 nurses and 84 auxiliaries a year. This area is also the least favored in social and economic development, and the Government is most concerned in meeting urgent basic needs.

The Federal Government has plans to develop several integrated health service projects in this area and to concentrate substantial efforts in accelerating and improving the training of nursing personnel at all levels for the organization of the needed nursing services. It has drawn up a five-year plan to carry out these educational activities with the collaboration of local Governments and institutions and the cooperation of UNICEF and PAHO/WHO.

The purpose of this project is to train a large number of nursing auxiliaries for the basic nursing services in hospitals, maternities, and public health units, and to prepare a smaller number of graduate nurses as teachers and supervisors for the training programs and the nursing services.

Provision is made in 1964 for one nursing consultant, teaching supplies and equipment, and for fellowships.

BRAZIL-64, Pediatric Education (Recife) (See page 236)

The University of Recife has one of the most advanced medical schools in the country, and the teaching of basic sciences has reached a particularly high level. It is now proposed to make a special effort to improve the teaching of pediatrics.

It will be necessary to install facilities for post-graduate training, and for the Pediatrics Department to engage in other fields, especially those relating to public health, and to serve as a training center for personnel of various types. Moreover, conditions must be created so that the faculty will be a full-time one.

UNICEF is cooperating in this project.

Provision is made in 1964 for short-term consultants and for fellowships.

BRAZIL-65, Planning (See page 236)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises Governments on request on the preparation and execution of national health plans as components of national plans for social and

economic development. Consultants will also render advisory services to the Governments on the organization of planning units within Ministries of Health.

Upon requests by countries, brief courses regarding principles and techniques of planning will be developed to orient key personnel of national health services.

Provision is made in 1963 and 1964 for short-term consultants and the award of fellowships in 1964.

INTERCOUNTRY PROGRAMSAMRO-137, Training Center for Malaria Eradication (Sao Paulo) (See page 238)

The Malaria Training Center in Sao Paulo was created in 1958 because of the great demand to train personnel for the Brazilian eradication program and for other Latin American campaigns.

The Training Center is in the School of Hygiene and Public Health of Sao Paulo through an agreement between the Government, the School and the Organization. It provides for two main courses: one for physicians and engineers and one for entomologist with special emphasis on malaria. It is expected that the Center will continue to function throughout 1964 when the needs for trained malaria personnel in considerable numbers will be fulfilled.

Personnel assigned to Brazil will continue to cooperate in the development of the courses. Funds will be provided in the form of a grant for contractual and common services, supplies and secretarial services.

AMRO-189, Veterinary Public Health (Zone V) (See page 238)

The Veterinary Public Health Advisor of the Zone collaborates with veterinary and health officials in the country in problems of food control and zoonoses. Special attention has been given to rabies, brucellosis, and veterinary public health training.

The functions of the public health veterinarian are: to provide technical support and guidance to national and international personnel in the planning and implementation of veterinary public health activities integrated into the general public health programs; and to assist in the training of public health veterinarians and other public health personnel.

Provision is made for a public health veterinarian to work with health and agricultural authorities with respect to the zoonoses and to hygienic control of food products.

AMRO-201, Health Statistics (Zone V) (See page 238)

Vital statistics and reports on notifiable diseases in Brazil are available at present only from Rio de Janeiro and other state capitals. The stimulation of these essential activities throughout the country is a great interest. To provide technical assistance with respect to this problem, the Organization has assigned a consultant(s) to give advice for the improvement of vital and health statistics,

with special emphasis on notifiable disease statistics, on development of health statistics in accordance with recommended standards, and on use of the data in program planning; (b) to give courses in statistics and to render assistance in the selection and follow-up of fellowships students and in the development of seminars, workshops, and other training activities in statistics; and (c) to advise on statistical phases of projects and assist in the compilation and analysis of information in the country for purposes of program planning.

Provision is made for the statistician and for fellowships.

AMRO-208, Sanitary Engineering (Zone V) (See page 238)

The Zone sanitary engineer will assist with the following activities: coordination of the work of the Organization's engineers stationed in individual projects; advice to the Government of Brazil on matters relating to technical, financial, and administrative aspects of water supply, sewage and industrial waste disposal, garbage and refuse disposal, food and milk sanitation, air pollution, vector control, industrial hygiene and the sanitary aspects of housing. The engineer will be available to cooperate with the Government in the development and submission of projects to various financing agencies and will assist, as requested, in all phases of such projects. Special studies will be undertaken to collect such information as will facilitate the interchange of technical data with other countries.

The training of sanitary engineers and sanitarians and the strengthening of environmental sanitation services in the Ministry of Health will be major areas of activity.

Provision is made for fellowships and beginning in 1963 for a sanitary engineer and a secretary.

AMRO-293, Nursing (Zone V) (See page 238)

The nurse adviser of Zone V assists with the following activities: (1) technical guidance of nurses stationed in individual projects; and (2) cooperation with federal and state departments of health to determine nursing and midwifery needs and resources; to plan programs for public health and hospital nursing, midwifery services, and nursing education; to develop these professions in order that they may provide optimum services adapted to changing health needs; and to evaluate nursing and midwifery programs.

The nurse adviser also undertakes special studies and collects such information as will facilitate the interchange of technical data with other countries.

Major areas of service will be strengthening of nursing and midwifery services and training of personnel for these services.

Provision is made for one nurse and one clerk stenographer beginning in 1963.

## PART III

## ZONE VI

Zone Office (See page 240)

For text see "Zone Offices," page 39.

ARGENTINAARGENTINA-3, Nursing Education (See page 240)

One of the greatest obstacles to the development of public health programs in Argentina is the critical shortage of trained professional and auxiliary nursing personnel and of the means to train them. There are about 120 schools that do not meet the minimum standards for nursing education.

The Organization cooperates with the Government in a program aimed at training nursing personnel and promoting and developing hospital and public health nursing services.

The program was begun in 1957. International consultants assisted in the establishment and development of nursing schools at four universities; in the organization and development of courses for nurse instructors and auxiliaries, of national and local seminars and congresses, of refresher courses, and of in-service training programs for nursing personnel; in improvement of clinical practice areas; in the institution of public health nursing; in the establishment and operation of nursing departments at the national, provincial, and local level; and in the preparation of text books and teaching material. Assistance is also given to the schools at the National University of Cuyo (Mendoza), La Plata (Buenos Aires Province), and Tucuman.

UNICEF is assisting in planning the extension and consolidation of this program, which includes the establishment of six permanent training centers for professional and auxiliary personnel of the health services. These centers will work in close association with the university schools.

Provision is made for four nurse consultants in 1962 and, in 1963 and 1964 for five such consultants, and for fellowships.

ARGENTINA-4, National Institute of Microbiology  
(See page 242)

The National Institute of Microbiology manufactures most of the chemical and biological products used in the diagnosis and treatment of diseases that are important in public health, and at the same time serves as a medical and epidemiological research center.

The Organization cooperates with the Government of Argentina for the purpose of increasing the efficiency and improving the scientific level of the work of the Institute. To this end, a preliminary study was made and a reorganization plan prepared in 1958. The Institute at present has a scientific staff of 125 full-time employees as well as 540 persons employed in administrative, secretarial and auxiliary posts.

A training program for the basic personnel of the Institute is in full operation. The Organization has granted fellowships for specialization in virology, pharmacology, and bacteriology, and the Government has granted fellowships to 21 technicians to study abroad. The Institute's capacity for producing glycerinated smallpox vaccine has been considerably increased and at present is about 20 million doses a year. The building housing the Department of Virology is almost completed, and several of its sections are already working in it. The physical facilities of the Bacteriology Department have also been improved, and a new BCG vaccine production unit has been completed. In 1961 a consultant of the Organization collaborated with the Institute in improving the methods of producing pertussis vaccine and diphtheria toxoid.

In future years it is planned to strengthen the Departments of Bacteriology, Virology, Pharmacology, Parasitology, and improve the production of biologicals. It is also intended to standardize the methods for the sero-diagnosis of syphilis used in the Institute and in the laboratories of the provinces. Personnel training is receiving continued attention.

Provision is made for short-term consultants and for fellowships.

ARGENTINA-7, Health Services (El Chaco, Rio Negro, Misiones)  
(See page 242)

Study of the health needs and resources of the country revealed a need for demonstrating the advantages of integrated health services. This work was begun in the Province of El Chaco, since it was one of the territories where the conditions were suitable for development of a program of this magnitude.

The aim of the program is to organize a provincial health service; to facilitate the training of all personnel; to standardize existing health and welfare agencies, especially in regard to environmental sanitation, control of communicable diseases, medical care, vital statistics, health education, and public health laboratories; to obtain the cooperation of the University of the Northeast in the organization and operation of a school of nursing; and to stimulate scientific research.

The plan covers various levels in the provincial health administration and gives particular attention to rural areas. The welfare side of the program will consist of activities directed toward strengthening the administration of hospitals and their coordination in preventive work. The training facilities will also be used for training personnel who will serve in other areas.

UNICEF provides supplies and equipment for the program.

Provision is made for a medical officer, a sanitary engineer, a health educator, and a public health nurse. Fellowships are also provided for 1963 and 1964.

ARGENTINA-8, Malaria Eradication (See page 242)

In the Republic of Argentina, the malarious area covers approximately 270,400 square kilometers. While malaria has been eradicated in certain areas, there are still others in which the final objective has not yet been achieved. In 1958, the Organization collaborated with national experts in drawing up a national eradication plan; the Government wishes to carry it out in order to consolidate the gains made and to eradicate the disease in the entire area affected.

The Plan of Operations was signed in 1959, and, in accordance with it, UNICEF provides equipment and materials, and the Organization technical advisory services, fellowships, and antimalarial drugs. The program began in August 1959. It is at present in its third year of operations. During the fourth DDT cycle a total of 76,991 sprayings were made. In 1961, 137,859 blood slides were examined, of which 4,541 were positive. Malaria transmission was interrupted in several of the areas treated. The National Government has been increasing the budget for this project every year.

Provision is made for one malaria consultant, one sanitarian, antimalarial drugs, and fellowships for training local staff for the project.

ARGENTINA-13, PAHO Fellowships for Health Services (See page 242)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its public health services.

ARGENTINA-17, School of Public Health (See page 244)

In 1958, a commission composed of representatives of the Universities of Buenos Aires, Rosario, and Cordoba, and of the National Ministry of Public Health made a survey of the training of various types of public health workers. After examining the organization and characteristics of the public health services of the country, personnel requirements, types of personnel that should be trained and existing training facilities they submitted a plan for the organization of a School of Public Health. The members of the commission had the opportunity, under the auspices of the Organization, to study the organization and curricula of Schools of Public Health of Sao Paulo, Brazil, and of Santiago, Chile.

In 1960 and 1961 the Organization helped to organize courses at the School of Public Health and provided short-term consultants in maternal and child health, epidemiology, and health legislation; four fellowships were awarded to professors of the School.

Provision is made for a professor of public health, fellowships, and supplies and equipment. Short-term consultants are also provided in 1963 and 1964.

ARGENTINA-18, Medical Education (See page 244)

When the reorganization of medical education was begun in Argentina in 1958, several medical

schools decided to revise their teaching, in particular in preventive medicine. This program includes the preparation of faculty members by means of specialized training in the country and abroad, the reorganization of curricula, the modernization of teaching methods, and an increase in teaching equipment and supplies.

In 1959, under the auspices of the Organization, the deans of the schools of medicine of the universities in Buenos Aires, La Plata, Cordoba, and the Litoral, visited the United States of America, Puerto Rico, Colombia and Brazil in order to study the organization and curricula of schools of medicine in universities. During the period 1958-1960, fellowships were awarded to eight professors from various schools of medicine. In 1960, a short-term consultant was provided for the School of Medical Sciences of Mendoza to give advisory services to the Department of Preventive Medicine.

In 1961 fellowships were provided to the teaching staff of the University of Cuyo Medical School in Mendoza.

Provision is made for short-term consultants and fellowships for teaching personnel in 1962.

ARGENTINA-20, Tuberculosis Control (See page 244)

In 1960 and 1961 the Government conducted surveys to determine the prevalence of tuberculosis in the Provinces of Chaco and Neuquén and to obtain data on the epidemiological characteristics of the disease. So as to strengthen tuberculosis control activities and to amplify epidemiological studies the Government has asked the cooperation of the Organization in establishing a National Tuberculosis Control Center which will have the following functions: (a) to develop a model tuberculosis control program in an urban and rural area of Santa Fe province, such as can be readily adapted in any other locality or region of the country; (b) to develop a training program for professionals and for technicians of various types and at various levels that will enable them to participate in the national tuberculosis control program; (c) to develop research on the various aspects of the control program and of the training at the Center; (d) to provide advisory services to the public health agencies of the provinces in the planning of tuberculosis control programs, to supervise their execution, and to cooperate in their evaluation; and (e) to promote ways and means of coordinating the activities of the Center with those of the provincial agencies whose direct or indirect aim is to improve community health.

The Center, which is located in Santa Fe province, began operations in the first six months of 1961. A temporary consultant of the Organization and the staff of Zone VI cooperated with the local staff in setting up and organizing the Center.

Provision is made for short-term consultants and for fellowships for the teaching staff.

ARGENTINA-24, Planning and Organization of Hospital Services (See page 244)

During 1955-1956, the National Government, with the collaboration of the Organization, made a study of the problems of public health and medical care.



Within a general health plan, a program was planned to improve the operations of medical care services, including the following objectives: (1) collaboration with the National Ministry and the institutions it recommends on matters of hospital administration and organization; (2) continuing studies on medical care problems, available resources, and organization of establishments; (3) training of personnel for hospital administration; and (4) planning of a nation-wide medical care program.

As a supplement to this program, in the field of hospital statistics and personnel training, a course on medical histories and records will be given to librarians by a special consultant. A demonstration area will at the same time be prepared at the Avellaneda Hospital.

Advisory services are being given by an expert in hospital administration who, for reasons of urgency, has collaborated also in a program of reconstruction of the hospitals destroyed by the earthquake in southern Chile, and in a program of the Alliance for Progress (hospital construction) in Uruguay. The Zone consultant (AMRO-304) will also continue to provide advisory services. Provision is made also for fellowships.

#### ARGENTINA-25, Training of Nursing Personnel (See page 244)

The aims of the program are: (a) to train professional nurses to administer and supervise the nursing services; (b) to train nurse instructors to teach nursing auxiliaries; (c) to train new auxiliary nursing personnel and those already in service for hospitals and basic health programs; (d) to consolidate the existing advanced nursing schools and to promote the improvement of the other schools in order to ensure the correct training of both professional and auxiliary personnel; (e) to contribute to the improvement of the nursing services in health institutions; and (f) to provide the students with practical experience in training and supervising auxiliary nurses.

During the first stage, which is to last for four years, it is planned to establish regional training centers under the nursing schools of five universities and at the National School of Public Health of the Ministry. This process will subsequently be repeated in those provinces that are interested in developing similar programs. Assistance is given to the schools of medium level for strengthening their program and technical and administrative structure, and for consolidating or organizing nursing services in hospitals and health centers.

UNICEF collaborates in this project.

Provision is made for one nurse educator, fellowships, and teaching material.

#### ARGENTINA-27, Mental Health (See page 244)

In Argentina there are 15 psychiatric hospitals with about 20,000 patients. The Government has created the National Institute of Mental Health to take care of all aspects of this problem on a national scale. The Institute has the following purposes: to collaborate in the prevention of mental diseases; to provide complete care to the patients, including social restoration and rehabilitation; to encourage scientific research; to

provide technical assistance to national provincial, municipal and private agencies and to coordinate their activities; and to train personnel at all levels.

It is planned to establish a pilot training center for the preparation of: (a) senior staff in charge of planning, administering, and supervising the mental health programs; (b) teaching personnel who will give training in methods of medical care of patients; (c) public health nurses specializing in mental health; (d) physicians and nurses in charge of rehabilitation programs; and (e) other professional and auxiliary personnel needed for the program. Up to 1961 the Organization granted fellowships for courses in psychiatric medicine and nursing.

The Public Health Ministry of Mendoza has also requested advisory services for a program on medical care of mental patients and the organization of psychiatric services.

Provision is made for short-term consultants and for fellowships.

#### ARGENTINA-28, Leprosy Control (See page 246)

Leprosy is endemic in Argentina. In 1958 the prevalence rate was 52 per 100,000 inhabitants for the entire Republic, and it is highest in the northern provinces and the region close to the Paraná River. Early in 1960, the number of leprosy cases reached 10,321.

In 1960 a tripartite plan of operations was established for developing a control program that would put into practice modern procedures regarding prevention, diagnosis, and treatment, as well as the training of professional, technical, and auxiliary personnel. National and provincial health services and educational and private agencies will cooperate in case-finding by assisting in a health education campaign and enlisting community support. In the areas of median and high incidence the staff of the dispensaries, acting under the technical supervision of the Dermatological Control Administration of the Ministry of Public Health and in close cooperation with the other health services, will be responsible for the detection and control of leprosy patients and their contacts. Treatment will be basically ambulatory, and the campaign will be conducted in the Federal Capital and eleven provinces.

The central office of the Dermatological Control administration was organized in 1961; both technical and auxiliary personnel have been trained and a broad program of health education carried out. A plan of operations for pilot centers in four provinces was prepared. In order to facilitate the coordination and integration of leprosy control with the health agencies, agreements were concluded between the national and provincial Governments.

UNICEF is participating by providing equipment, vehicles, drugs, and supplies.

The Zone leprosy consultant (AMRO-305) will provide advisory services to this project.

Provision is made for the award of fellowships.

ARGENTINA-29, Promotion of Community Water Supplies  
(See page 246)

The Ministry of Public Works, through the National Sanitary Works Agency, the Ministry of Social Welfare and Public Health, and the Governments of the Provinces of Argentina, are interested in drawing up a long-term water supply program for urban as well as for rural areas.

The recent Government decree envisaging new structure for the public services administration, especially as regards water supply and sewage disposal systems, will bring about the decentralization of activities, since these services will be administered directly by the Provincial Governments. The National Sanitary Works Agency will act as the technical advisory agency.

Technical difficulties, particularly those of a hydrogeological nature in providing water to the inhabitants of the interior of the country that use ground water, will make assistance necessary in the fields of engineering, administration, and financing.

Provision is made for short-term consultants.

ARGENTINA-30, Sanitary Engineering Education (See page 246)

The School of Sanitary Engineering of the University of Buenos Aires was established in 1959 as part of the Hydraulics Department of the Department of Engineering. To date it has graduated 27 sanitary engineers. It has a corps of professors and one director, the latter working on a full-time basis. The students are fellows of the National Sanitation Works Agency, which employs them upon satisfactory completion of their studies.

One consultant of the Organization collaborated with the School of Engineering in analyzing the curricula and the organization of the School. This analysis showed that the organization and teaching methods are satisfactory but that they require strengthening in certain aspects. The personnel of the Zone Office cooperated in the development of these courses, and fellowships were awarded for professors.

Provision is made for short-term consultants to collaborate in revising the curriculum, and for fellowships for training the faculty as well as in several other fields of sanitary engineering.

ARGENTINA-32, Health Statistics (See page 246)

In Argentina the national statistics are a consolidation of the statistics produced by the provinces and do not provide important data needed for planning health programs. In order to overcome this problem, the National Government and the Government of the Province of Buenos Aires signed an agreement in December 1960 which includes the organization of a new system of registration, collection and analysis of vital statistics in the province for the purpose of improving the statistics and creating a demonstration area for the country which is serving for the public health students of the two Schools of Public Health in Argentina.

The zone office provides consultant services in the field of statistics. Provision is made in 1963 and 1964 for short-term consultants and fellowships.

ARGENTINA-33, Maternal and Child Health (See page 246)

Among the factors adversely affecting maternal and child health are inadequate environmental sanitation, summer diarrheas, the fact that milk of good quality is not available, and the small number of qualified personnel available for carrying out services in this field. The Government is desirous of putting into effect a plan that will lead to a complete solution of the problem. The activities to be undertaken by the Ministry of Social Welfare and Public Health, the provincial health services, and the universities, for which a special fund of 100 million pesos a year is available, are an important aspect of this plan.

A study of the problem, carried out with the advice of the Organization, has drawn attention to the need to strengthen the Maternal and Child Health Bureau of the Ministry, and to integrate it with other basic public health activities; to extend the provincial health services; to train personnel; and to supplement other services offered by social security agencies.

Provision is made for a short-term consultant on maternal and child health and for fellowships.

ARGENTINA-35, Public Health Services (San Juan)  
(See page 246)

With the technical assistance of PAHO/WHO and the aid of UNICEF, with which it concluded the pertinent agreements, the Government has been conducting an integrated public health program in the Province of San Juan, based on the experience acquired in the program of public health services of El Chaco Province in Argentina.

The province of San Juan offers good prospects for economic development. It has a population of approximately 370,000, of whom 25 per cent are concentrated in the Ullun Valley, the site of the capital of the province. There is a high prevalence of preventable diseases, particularly gastro-enteritis, tuberculosis, and other diseases of infancy. Environmental sanitation conditions are poor; 90 per cent of the population lives outside the capital city and lacks drinking water and sewage disposal facilities.

Early in 1961 and in accordance with the established plan of action, reorganization of the provincial health service was begun, based on a central technical policy-making structure, administrative decentralization, the promulgation of a sanitary code, and the establishment of a career service for public health personnel.

With active community participation it is expected to develop within a period of five years, a system of local health services to strengthen the present structure of medical care, and to incorporate the basic activities of public health in each work area, so that they may provide an integrated service of health protection, promotion, and restoration.

The Government has requested the cooperation of UNICEF, which has approved the provision of supplies and equipment for this project.

Provision is made for one medical officer, one sanitary engineer, one legal and administrative consultant, one public health nurse, and fellowships.

ARGENTINA-51, Aedes aegypti Eradication (See page 248)

In Argentina Aedes aegypti is found in an area of 1,500,000 square kilometers, extending over 15 provinces.

A letter-agreement was concluded with the Government of Argentina on 30 September 1954 as part of the continent-wide eradication program.

By the end of 1961 the progress achieved was appreciable. Of a total of 3,154 localities inspected, Aedes aegypti was found in 165 and after appropriate action eradication was achieved in 147 of them. A total of 1,550,047 houses were inspected, and 185,691 were treated with DDT; breeding places were eliminated from 6,388 houses. Deposits inspected or treated totalled 18,597,122.

These figures indicate the amount of work accomplished in Argentina.

With the resources available for the program, it is expected to complete the survey at the end of 1962 and to complete the last eradication activities before the end of 1963.

Provision is made for a medical consultant through 1962 and a sanitarian through 1963.

CHILE

CHILE-21, Rehabilitation Center (See page 248)

Approximately 5,500 accidents resulting in total or partial disability of the victims occur each year in Chile. Available statistics indicate that 2,000 of these disability cases are the result of accidents at industries and occupational diseases, chiefly in the 18-to-35 age group.

The purpose of this project is the development of a nation-wide plan for the coordination of existing resources in an attack on the problem of disability and invalidism of all types and origins.

Initially a pilot rehabilitation center is to be organized with shops for making appliances and a school for training personnel. Later a permanent Institute of Rehabilitation will be built to accommodate 1,500 patients and the appliance shops will be reinforced. Other rehabilitation centers will be organized throughout the country.

Provision is made for a prosthetics technician and a physiotherapist. Supplies and equipment are also provided for in 1962.

CHILE-22, Institute of Occupational Health (See page 248)

About 5,500 accidents occur in Chile each year and give rise to disabilities of various degrees. Most of these are primarily the result of occupational, particularly industrial, hazards.

The age group 18-35 years is most affected so that the national and family economy suffers a loss of work capacity and financial remuneration. Other countries in Latin America in which industrial development is increasing are faced with a similar problem. A regional institute of occupational health, with advisory and training functions, would therefore be advisable.

The development of teaching and control programs in occupational health in these countries has not kept pace with the development of the mining, construction, and processing industries so that it has not been possible to assign to these activities their proper role in modern public health.

An Institute of Occupational Health will offer advisory services to both the Government and private industry, and at the same time train national personnel and fellows from other countries. It will perform research on health problems in local industry.

In addition to the technical assistance provided through the WHO/TA program, the Special Fund of the United Nations has approved a five year program totalling \$404,000.

Provision is made for one engineer and short-term consultants in occupational health, for fellowships, and for supplies and equipment.

CHILE-26, PAHO Fellowships for Health Services (See page 250)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its public health services.

CHILE-27, Health Services (Ovalle-Copiapo) (See page 250)

The aim of this project is to expand and develop a coordinated urban and rural health service in the provinces of Ovalle and Copiapo. The program includes the improvement of maternal and child services; environmental sanitation, particularly water supply and sewage disposal systems; control of communicable diseases and improvement of general medical care services; organization of training courses for auxiliary nurses and midwives; a health education program; and public health laboratories. Another important aspect is an intensive occupational health program designed to improve the health conditions of workers.

UNICEF provides supplies and equipment for the maternal and child health and environmental sanitation activities. The Organization furnishes the services of its Zone VI staff and in 1962 of short-term consultants.

CHILE-31, School of Public Health (See page 250)

The aim of this program is to strengthen teaching at the School of Public Health of the University of Chile and to expand its teaching facilities for students of other American countries. Previously, under AMRO-16, several professors of the School visited the countries from which their students came, with the object of adjusting their teaching to the public health organization and general conditions in those countries. In previous years the School was provided with visiting professors in public health administration, biostatistics, and sanitary engineering, and travel grants were awarded to professors to enable them to observe methods and curricula in other institutions. A limited amount of supplies and equipment was also furnished.

Provision is made for short-term consultants, equipment, and fellowships.

CHILE-34, Training of Auxiliary Nursing Personnel  
(No budgetary provision - advice of regular staff only)

The immediate aim of this program is to train 600 nursing auxiliaries for service in rural area at 10 training centers distributed throughout the country. The first stage, which will last for three and a half years, will cover the services of Antofagasta, Valparaíso, Santiago, Talca, Linares, Chillán, Concepción, Temuco, Valdivia, and Puerto Montt; two evaluation seminars will be held during this stage.

The program was initiated in October 1959 with an intensive course for local nurses who, as instructors and supervisors, would assume the responsibility of directing and executing the program. Nine of the ten planned centers were established in the third year of operation and 325 nursing auxiliaries were trained; 255 are being trained at present. These trained nursing auxiliaries are immediately incorporated into the local services as personnel recruited with the budget allocations provided for this purpose. In 1960 the National Health Service established the National Register of Nursing Auxiliaries, thus giving legal status to graduates of this course together with the corresponding grade in the nursing service. The Organization provided fellowships for instructors of nursing auxiliaries.

UNICEF provides material, supplies, equipment, fellowships, and vehicles.

PAHO/WHO cooperates in this program by providing the advisory services of Zone VI Office staff.

CHILE-35, Nutrition (See page 250)

The Government, with the collaboration of FAO, WHO, and UNICEF, is carrying out a program to intensify its distribution of milk to schools, to establish a health education campaign in nutrition, to organize school gardens in 80 schools as demonstration projects, to train 240 school teachers for the development of the program, and to produce educational materials for the campaign.

In addition to the services of the zone adviser in nutrition, the Organization is providing for fellowships in 1964.

CHILE-37, Medical Education (See page 250)

In medical education emphasis is placed on the teaching of small groups. Although the faculties of medical schools of Chile possess a high degree of technical competence, their experience to date has been mainly in university lectures. It is recognized that fresh orientation is needed to enable them to use the methods of teaching in small groups.

Provision is made for short-term consultants to cooperate in this new departure, as well as for the necessary supplies and equipment, and for fellowships.

CHILE-39, Training in the Medical Use of Radioisotopes  
(See page 250)

A Latin American Center to train physicians in the medical use of radioisotopes is being planned with the collaboration of the Government of Chile, the W.K. Kellogg Foundation, and the Organization. The services and facilities of the various departments of the El Salvador Hospital of the University of Chile will be used for training. Intensive four-month courses will be given annually. The teaching program will consist of the physics of radiation as well as the planning and operation of laboratories using isotopes and techniques of using radioisotopes in various specialties.

The Center will also offer theoretical and practical training in the precautions to be taken in handling radioactive materials in order to protect the workers and the public.

In 1959 the Kellogg Foundation awarded a fellowship to a physician for training in the United States and also provided specialized supplies and equipment. In 1961 PASB/WHO supplemented this material by providing certain supplies and equipment for teaching purposes, which was needed because of the advances made in organizing the course.

Provision is made for teaching supplies and equipment.

CHILE-40, Promotion of Community Water Supplies  
(See page 250)

In Chile the administration, operation, and construction of community water supplies is the responsibility of the Department of Sanitary Works. In the capital city this function is exercised by the Santiago Water Board.

Both the Department of Sanitary Works and the Water Board are interested in improving the water supply systems of various localities throughout the country and of Santiago proper. To this effect, they are conducting technical and financial studies on the execution of the plan. The Organization has provided technical advisory services to the city of Santiago since 1961, and expects to continue them in 1963 and to extend them to other cities if required.

Negotiations are under way for obtaining a loan from the Inter American Development Bank for the construction in Santiago of a new treatment plant which will also service the cities of Concepción and Talcahuano.

Provision is made for short-term consultants.

CHILE-41, National Planning for Nursing  
(See page 252)

Chile's national plan aimed at providing the population of the country with health promotion, protection, and restoration services is faced with the problem of a shortage of nurses. The Government plans to intensify plans that will raise the level of care in the shortest time possible and is taking the necessary steps to increase nursing personnel by providing economic and social stimulus and through the development of new programs of professional education which, although simplified, meet the needs of the country.

Chile has an estimated population of about 7,000,000 and a network of health services consisting of 675 establishments. There are 45,514 hospital beds available. Nursing care is provided by 1,299 nurses and 7,530 auxiliaries of all kinds. There are five nursing schools attached to universities, which graduate about 100 nurses per year, and there is an advanced nursing course which prepares 10 nurses a year for higher positions in the profession.

The national survey on nursing was completed in 1961, and both short-term and long-term plans intended to meet the most urgent needs for nursing personnel for the health services of the country were initiated. The Government has requested the cooperation of the Organization in this program.

Provision is made for a nurse and for fellowships, as well as for a limited amount of supplies and equipment.

CHILE-43, Administrative Methods and Practices in Public Health (See page 252)

With a view to making its administration more efficient by simplifying and improving its administrative methods and procedures the National Health Service requested the cooperation of the Organization primarily in establishing modern and practical systems of personnel administration that would permit the proper selection of staff, a clear definition of their functions, training and the establishment of a grading system, promotion procedure and records of the personnel of a complex administrative structure covering the whole country.

In accordance with these purposes, the National Health Service was provided early in 1961, with a consultant specialized in personnel administration who together with the local staff made a preliminary study in order to formulate plans for the organization and establishment of the aforementioned mechanized systems of personnel records and control. This study was continued in 1962.

It is estimated that from 1963 onwards the Bureau will only need to provide advisory services for limited periods since the National Health Service has staff capable of assuming the entire responsibility for the direction and execution of the plans for the personnel program.

Provision for this project will in future be made under the Zone project (AMRO-319). The consultant in administration will continue to provide services until the end of 1962.

CHILE-44, Cancer (See page 252)

The following figures give an idea of the importance of the problem of cancer in Chile: an average of 7,000 deaths annually, and an estimated prevalence of 20,000 cases, of which only some 8,000 are hospitalized each year. The cancer mortality rate is only 105 per 100,000 inhabitants, because of the high proportion of the population in ages below those at which cancer generally occurs. When these rates are adjusted, based on the population of the United States of America, they average about 165 per 100,000 (1953-1957 average). For three years, the Sub-Department of Cancer and Chronic Diseases has been in operation in the National Health Service. Its objective has been the study of prevalence and distribution of cancer in the country, as well as research on rates of survival according to the location of the lesions and the clinical forms.

It is planned to extend the program by establishing center for early diagnosis, particularly for cervical-uterine cancer.

Provision is made for short-term consultants and fellowships in 1962.

CHILE-49, Health Services (See page 252)

About one third of the population of Chile and five of its health zones were affected by the devastating earthquake of 1960. In these zones plans have been formulated for integrated health services.

UNICEF cooperates in this project which emphasizes maternal and child health, medical care, environmental sanitation, nursing, health education and nutrition.

Provision is made for a short-term consultant in sanitary engineering in 1963 and 1964.

CHILE-51, Health Education in Primary Schools  
(No budgetary provision - advice of regular staff only)

The close relationship between a population's degree of health education and the activities of health promotion have led the Government of Chile to formulate a plan aimed at improving health education in elementary schools. This activity is to be carried out by the competent departments of the Ministries of Education and of Public Health.

Improved programs of health education in the primary schools in the country, improved sanitary and safety conditions of the buildings of teachers training colleges, the training of teachers of biology and school health, and the development of a program of medical and dental care, and other services, and the evaluation of the results are some of the more important aims.

UNICEF provides supplies and equipment.

PASB/WHO will cooperate in the project by providing the services of Zone VI personnel.

CHILE-52, Community Development (Chiloé Island)  
(See page 252)

A team of four consultants (one each from FAO, U.N. UNESCO, and WHO) will advise and assist the Government of Chile in the planning and operation of two community development pilot projects (in Castro and Queillén) for the rehabilitation of the people affected by the 1960 earthquakes and floods on the Island of Chiloé.

The team will also assist in training local personnel in the principles and methods of community development.

This program will serve as a demonstration project for future extension of similar activities to other places in the island and in the country.

Provision is made for a public health adviser in 1962.

PARAGUAY

PARAGUAY-1, Malaria Eradication (See page 252)

At the end of October 1961 the Malaria Eradication Service of Paraguay decided to include in the malarious area several departments that were originally considered free of disease; this decision was the result of epidemiological surveys and cases detected by the evaluation network.

A study of operations under way made in 1961 led the national authorities to interrupt sprayings, reduce the field personnel, increase evaluation and epidemiological surveys, and prepare the personnel of the Service so as to initiate after a reasonable period of time a new preparatory phase which would last throughout 1962 and subsequently to carry out the remaining phases of an eradication campaign.

Provision is made for one malariologist, one sanitary engineer, one entomologist, and three sanitarians, as well as for drugs, equipment, and fellowships.

PARAGUAY-10, Health Services (See page 254)

The fundamental aim of this plan is to bring the benefits of modern health techniques within the reach of the largest possible number of inhabitants, through:

(a) the provision of qualified personnel and the organiza-

tion of the necessary training activities; (b) strengthening of the services at the central and peripheral levels, with policy-making centralized and execution of activities decentralized; (c) improving the system of administration and the administrative basis; and (d) organizing, improving or consolidating the integrated programs of health centers to provide basic services in the fields of medical care, maternal and child health, control of communicable diseases, environmental sanitation, laboratory services, public health nursing, nutrition, statistics, and social welfare.

To increase the number and improve the quality of personnel, training was given abroad and in local courses. All the central technical agencies, the headquarters of the services for the capital and the regions, and the 16 health centers in the interior of the Republic have one or more senior administrative officials who have taken courses in public health.

Significant progress has been made in the planning and execution of administrative procedures and in the attitude of personnel towards administrative aspects as a basic element for planning and implementing health activities.

The country is divided into four health regions, which include 48 health centers of various kinds, all with some facilities for the hospitalization of patients and maternity cases. There are 120 health posts, of which 60 have full-time trained midwives. To supplement them, there are in the capital 21 medical stations, the central laboratory, and the sanitation workshops.

Specific programs are gradually being integrated into the activities of the health centers; environmental sanitation work has been consolidated and control of communicable diseases and training of personnel have advanced.

UNICEF provides a certain amount of supplies and equipment.

Provision is made for a chief country adviser, an epidemiologist, a sanitary engineer, and a public health nurse, a consultant in administration (in 1962), and a statistician and in 1963 a nurse-midwife, as well as for fellowships.

PARAGUAY-13, PAHO Fellowships for Health Services  
(See page 254)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement of expansion of its health services.

PARAGUAY-18, Nutrition (No budgetary provision - advice of regular staff only)

The Government with the collaboration of FAO, WHO, and UNICEF is developing and expanding a program of nutrition education in the schools and through the extension services of the Ministry of Agriculture.

The extension in 1962 and 1963 will be to 60 new schools where school gardens and poultry houses will be created. Parent groups will collaborate in the project and courses in the classical elements of nutrition education and related activities will be given. The Central Laboratory of the Ministry of Public Health will participate through training as well as food analyses and clinical research related to malnutrition.

Advisory services will be provided through the Zone Nutrition Adviser to be assigned in 1963.

PARAGUAY-19, Promotion of Community Water Supplies  
(See page 254)

The recently completed water system in Asunción is administered by the Corporation of Sanitary Works of Asunción. The National Sanitary Works Agency is at present being established in order to solve the water supply problem of the other cities in the country.

The technical, administrative, and financial problems of these institutions will require specialized personnel, and it is therefore considered necessary to make provision for the recruitment of advisers.

Provision is made for one sanitary engineering consultant and for short-term consultants (1963-1964). In addition, a consultant in well-drilling is being provided under a grant from UNICEF in 1962.

URUGUAY

URUGUAY-5, National Health Services (See page 254)

The aim of this program is to promote the health of the population through establishment of health centers and subcenters, coordination of existing agencies, training of personnel needed at all levels, and health education of the communities.

Seven health centers have been established which reach 50 per cent of the population of the area covered by the program. It is expected that by 1963 all the centers provided for in the plan of operation will be functioning.

Since 1956, four training courses have been held for 104 auxiliary nurses and two for 26 environmental sanitation officers. These courses will be repeated every year. In addition, the Organization has awarded 122 fellowships to physicians, nurses, sanitary engineers, veterinarians, statisticians, and sanitation officers for public health studies.

UNICEF cooperates in the program by providing supplies and equipment.

Provision is made for the services of one chief country adviser, one sanitary engineer, one public health nurse, and one hospital administrator as well as for fellowships.

URUGUAY-9, Chagas' Disease (See page 256)

The epidemiological studies carried out in the Department of Rivera, Artigas, and Paysandu, indicate the importance which Chagas' disease has reached in Uruguay. It is endemic in more than one-half of the national territory; approximately 500,000 individuals are exposed to the disease, of whom an estimated 50,000 are infected.

The campaign carried out in other countries show that it is possible to control the spread of this disease effectively through the application of certain residual insecticides. The experience acquired in other programs for control of diseases transmitted by insects and the staff and equipment available in other programs will facilitate the execution of this project.

Provision is made for fellowships in 1962.

URUGUAY-10, PAHO Fellowships for Health Services  
(See page 256)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement of expansion of its health services.

URUGUAY-13, Training of Health Personnel (See page 256)

The Ministry of Public Health has a School of Health and Social Service which trains nurses and runs short courses for auxiliary personnel. A Government decree requires all technical and auxiliary health workers who enter the service of the Ministry to have completed the appropriate course of training at the School.

The Government proposes: (a) to expand the curriculum of the School and, for this purpose, to revise the basic nursing curriculum by bringing it into line with the needs of the country; (b) to organize short courses in nursing administration and supervision; (c) to conduct courses for nursing instructors and auxiliary nurses for hospital and public health nursing; (d) to improve the clinical practice areas for the students of these courses; (e) to organize courses for sanitarians. In addition, as a long-range objective, further training courses will be organized for professional and technical personnel of the Ministry, according to the needs of the service. In 1961 a study was made of the nursing needs and resources and of the Nursing School "Dr. Carlos Nery". Fellowships for nurse instructors were provided.

UNICEF cooperates by furnishing teaching material and supplies.

Provision is made for one nurse educator, for teaching material and supplies, and for fellowships.

URUGUAY-16, Chronic Diseases (See page 256)

It is estimated that 75 per cent of the population of the country lives in urban areas, which makes it easy for them to use the health center services. One fourth of the population is under 15 years of age and 50 per cent are in the most active age group (15 to 50 years of age).

The three main causes of death in 1955 (of a total of 20,000 deaths) were the following: diseases of the circulatory system, 4,398; cancer, 3,910; and vascular lesions of the central nervous system, 2,247. Thus, more than 50 per cent of deaths were due to chronic diseases characteristic of advanced age.

The Ministry of Public Health is interested in making a thorough study of the epidemiology of chronic diseases and in attacking the problem through planned and systematic action by the official agencies. Almost all the hospitals and polyclinics in the country and cancer research and control centers are available as a basis for this study.

In 1961 a PASB/WHO consultant collaborated in a study of the problem and drew up a report.

Provision is made for short-term consultants and for fellowships.

URUGUAY-18, Promotion of Community Water Supplies  
(See page 256)

The national agency in charge of planning community water supplies in Uruguay, including its capital Montevideo is the National Sanitary Works Agency. It is at present interested in building a new treatment plant to serve the city of Montevideo, and in the improvement and expansion of water supplies in some localities in the interior of the country, and has been negotiating for loans for this purpose from the Inter American Development Bank. The planning of these services will require the assistance of specialized consultants.

Provision is made for short-term consultants.

INTERCOUNTRY PROGRAMS

AMRO-159, Health Statistics (Zone VI)  
(See page 258)

Vital statistics are improving although much remains to be done. A general orientation towards a greater use of statistics for planning of health programs in areas where better health can produce a greater impact on economic development is being noted in Zone VI. However, national and local systems of collection of morbidity data are in most cases inadequate and do not lend themselves to appropriate analysis; notification of diseases is improving. Statistics on hospitals and health institutions, medical facilities, personnel and resources, and services rendered are being increasingly used for proper and efficient programming in conjunction with data reflecting levels of health.

The need for trained personnel at all levels of production and analysis of data is being felt. Training programs have been organized in Argentina for statisticians at an intermediate level. The first course for 40 students started in 1961 and a second course is scheduled for 1962. Hospital statisticians are also being trained under project AMRO-156. Courses of statistics in medical research were given in the Faculty of Medicine of Buenos Aires in 1960 and 1961.

Activities of the statistical consultant are as followed: (a) assistance in adequate methods of collection processing, evaluation, analysis and utilization of population, natality, mortality, morbidity, hospitals, health resources and service statistics; (b) assistance in the organization and administration of programs of statistics for health use, with emphasis on demonstration projects; (c) assistance in the organization of courses and teaching of statistics in schools of public health and medicine, for the training of statistical personnel at all levels and for the selection and follow-up of fellowships students; (d) promotion of research through advise on adequate methods of sampling, selection, program planning and statistical analysis; (e) advice on statistical phases of projects and assistance for the compilation and analysis of information in the countries for purposes of program planning.

Provision is made for continuation of the services of the statistician and limited amounts of supplies.

AMRO-163, Epidemiology (Zone VI) (See page 258)

The functions of the consultant in epidemiology are: (a) to promote the development of eradication and control programs against communicable diseases; (b) to advise on methods and techniques of control; (c) to coordinate the programs of eradication or control of quarantinable diseases in the countries of the Zone; (d) to promote better reporting of communicable diseases; and (e) to advise on all problems related to the application of the International Sanitary Regulations.

Provision is made for an epidemiologist.

AMRO-209, Sanitary Engineering (Zone VI) (See page 258)

The sanitary engineering activities in the countries of the Zone are the responsibility of the Ministries of Health and of Public Works.

The engineer consultant of Zone VI is stimulating Government interest and activity in the matter of environmental sanitation through the planning and development of integrated health programs. He cooperates with the Governments in developing or preparing water supply and sewage disposal projects which are carried out in the countries by the Ministries of Public Works and other specialized institutions; cooperates with the various national and/or provincial agencies in determining the needs of the country, planning the programs and evaluating the results, and provides technical advice on sanitary engineering; coordinates the work of the Organization's engineers stationed in country projects; promotes and participates in the training of professional and sub-professional personnel for environmental sanitation; and cooperates with the Governments and UNICEF in establishing and justifying the needs for material and equipment which the latter agency provides for environmental sanitation programs, especially in rural areas.

Provision is made for one sanitary engineer and one clerk stenographer, and for fellowships, for specialized equipment in 1963 and fellowships in 1963 and 1964 for the water supply program.



AMRO-210, Medical Education (Zone VI) (See page 258)

In many countries, schools of medicine and of public health need continuous direct advisory services in order to progress. A professional educator has therefore been assigned to the Zone to study the status of teaching in the schools there, to furnish advice to schools that request it, to make recommendations on further PAHO assistance, to draw up a plan to promote the teaching of medicine and public health, and to increase assistance to other governmental and private agencies concerned with this problem.

Provision is made for one professional educator.

AMRO-294, Nursing (Zone VI) (See page 258)

The nurse adviser assigned to the Zone Office will assist with the following activities in all countries of the Zone: (1) technical guidance of nurses stationed in country projects; and (2) cooperation with national departments of health to determine nursing and midwifery needs and resources, to plan programs for public health and hospital nursing, midwifery services, and nursing education, to develop these professions in order that they may provide optimum services adapted to changing health needs; and to evaluate nursing and midwifery programs.

The nurse adviser will also undertake special studies and collect such information as will facilitate the interchange of technical data between countries.

Major areas of service to Ministries of Health will be the strengthening of nursing and midwifery services and the training of personnel for these services.

Provision is made for one nurse and one clerk stenographer beginning in 1963.

AMRO-304, Medical Care (Zone VI) (See page 260)

The planning and organization of hospital services as part of the medical care program are daily acquiring greater importance in all the countries of Zone VI.

The study of available resources, the planning and organization of services, the establishment of policy-making units in order to obtain better performance, the training of personnel at the administrative and technical levels, the coordination of the services and establishment of a plan to implement integrated health plans by stages, and the organization of education and training establishments or areas, are all common needs of the countries of the Zone.

Provision is made for a Zone consultant, who is an expert in hospital administration and who will continue to cooperate in the Argentine project in addition to his regular activities. In 1962 the W. K. Kellogg Foundation is sponsoring further training for the staff member assigned to this project. Provision is also made for supplies.

AMRO-305, Leprosy Control (Zone VI) (See page 260)

Leprosy is present, in varying intensity, in Argentina, Chile, Paraguay, and Uruguay. According to 1961 statistics, there are 11,493 persons with Hansen's disease in Argentina. Present data for Paraguay show a prevalence of 3,485 cases.

The authorities of the countries of the Zone have requested advisory services from the Organization and assistance from UNICEF in planning or developing control campaigns against this endemic disease.

Modern methods of leprosy control are being introduced in Argentina and Paraguay and programs are under way in each country. Uruguay has requested technical advisory services to determine the extent of the problem and to plan a control program in accordance with the importance of the problem and local conditions.

Provision is made for a leprosy consultant who will concern himself with the activities to be developed in the four countries mentioned, and, in 1963, for fellowships.

AMRO-319, Administrative Methods and Practices in Public Health (Zone VI) (See page 260)

In response to the XXXV Resolution passed during the X Meeting of the Directing Council, the countries in Zone VI have started programs in administrative methods and practices in their public health services. The Organization has also given assistance in this field in relation to the operation of national services for malaria eradication.

In view of the growing interest in modernizing their services and because of the urgency to improve their expanding health programs, the Organization will give additional advice and assistance.

Provision is therefore made for short-term consultants in administrative methods in 1963 and 1964.

AMRO-321, Nutrition Advisory Services (Zone VI) (See page 260)

The Governments, aware of the importance of problems arising from deficient nutrition, have established services for the purpose of organizing programs to improve the people's diet. Among the most important problems in the Zone are: malnutrition in children as shown by unsatisfactory physical and mental development; iron-deficiency anemias, whose etiology is as yet not well defined; and endemic goiter, which is still an important public health problem and requires the adoption of appropriate preventive measures. The background of these three specific problems

is the unsatisfactory diet of the general population, which affects the health of the people and the social and economic development of the countries.

The training of personnel specialized in nutrition and the preparation of public health personnel in this field is a priority among the activities to be performed. The nutrition programs conducted by the health, educational and agricultural extension agencies in the various countries also need to be coordinated. Moreover, further surveys are needed to determine the nature and magnitude of nutrition problems in the Zone, since the existing studies do not permit the establishment of a suitable nutrition policy.

Provision is made in 1963 and 1964 for a consultant in nutrition to cooperate in these programs.

AMRO-322, Planning (Zone VI) (See page 260)

In furtherance of the objectives of the Charter of Punta del Este, the Organization advises Governments on request on the preparation and execution of national health plans as components of national plans for social and economic development. Consultants will also render advisory services to the Governments on the organization of planning units within Ministries of Health.

Upon requests by countries, brief courses regarding principles and techniques of planning will be developed to orient key personnel of national health services.

Provision is made beginning in 1963 for a planning officer and for fellowships.

## PART III

## WASHINGTON OFFICE - COUNTRY PROGRAMS

CANADAUNITED STATES-12, Medical and Public Health Training  
(See page 262)

Officials of the USPHS Fellowships Program have visited countries of Central America and South America to observe health problems and health programs, and to confer with returned fellows.

Provision is made through a grant for continued educational visits of this type, which have proved effective in the planning of training programs within the United States for future fellows.

CANADA-2, Consultants in Specialized Fields of Public Health (See page 262)

Short-term consultants will be made available, as needed, for specialized problems in public health at the request of the Government.

Provision is made for short-term consultants.

CANADA-200, WHO Fellowships for Health Services  
(See page 262)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

AMRO-307, Field Office - El Paso (See page 262)

The programs of the El Paso Field Office are both intercountry (USA-Mexico) and interzone (Washington Office-Zone II Office). The Field Office is responsible directly to the Washington Office. Its functions are: (1) to stimulate and to promote joint study and planning of sanitary activities of adjacent border communities for the mutual improvement of health services and for the solution of health problems; (2) to maintain the Washington Office and the Zone II Office informed of border activities and to recommend international assistance for improvement of public health activities; (3) to collaborate with the Washington Office and the Zone II Office in planning and implementing international border projects; (4) to act as a channel for the exchange of epidemiological and other public health information between border health authorities; and (5) to serve as secretariat for the Mexico-U.S. Border Public Health Association.

Provision is made for a chief of Field Office, a sanitary engineer, a veterinary public health adviser, a nurse, an administrative officer (1962) and three clerks. Provision is also made for consultants, common services, and costs of conference services in connection with the role of the Office as secretariat of the Association.

UNITED STATESUNITED STATES-10, Consultants in Specialized Fields of Public Health (See page 262)

Short-term consultants will be made available for specialized health problems, at the request of the Government. In the past, these have been on subjects such as mental retardation, public health nursing, and gerontology.

Provision is made for short-term consultants.

UNITED STATES-11 (PAHO), UNITED STATES-200 (WHO), Fellowships for Health Services (See page 262)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement and expansion of its health services.

## INTERZONE

AMRO-3, Rehabilitation (See page 264)

Rehabilitation, which at one time was strictly limited to the locomotor system, has now become a much broader concept, and many countries are interested in expanding rehabilitation programs to include other diseases, such as heart diseases, tuberculosis, etc., and those diseases which affect the sense organs.

The personnel training programs that have been initiated in some countries have met with general interest. This development justifies the creation of a regional medical officer post whose incumbent will provide advisory services to the countries interested in carrying out a specific rehabilitation program.

AMRO-9.3, Seminar on Alcoholism (See page 264)

A seminar on alcoholism was held in Buenos Aires in 1953. As a consequence of the interest awakened by this meeting, recommendations by a consultant of the Organization prompted a control program in Chile which has been well received in the country. In order to promote knowledge on the development of control programs in this field countries of Latin America will participate in a seminar in 1962 to discuss techniques and procedures in determining the magnitude of the problem of alcoholism, review of present knowledge about this disease, and bases for integration of programs of treatment and prevention into over-all health plans.

Provision is made in 1962 for supplies for this seminar.

AMRO-10, Program for Biostatistics Education  
(See page 264)

This project was established for the purpose of improving vital and health statistics in the Latin American countries by training technical personnel of the various statistical services. The principal objective is the development of a training center at the School of Public Health of the University of Chile, with teaching in Spanish, and at the same time to work with the Government offices in Chile concerned with the various aspects of vital and health statistics so that they may serve as model offices for demonstration.

About 293 students from 20 countries have received training in the courses given in nine-years (1953-1961), of which half were from countries other than Chile. This education program is sponsored by the Government of Chile and WHO with the School of Public Health in Chile assuming major responsibility.

In 1961 the Faculty of the School revised their program of instruction. The second course for a degree with specialization in biostatistics was given; ten graduate students of which nine were physicians attended. Thus in 1961 the program was broadened to provide for instruction at the professional as well as the intermediate level. In July 1962, another six-month course at the intermediate level will be initiated. Beginning in March 1963, another fifteen-month course of the higher level will be provided.

Provision is made for fellowships and a grant to the School of Public Health for expanding their staff.

AMRO-16, Schools of Public Health (See page 264)

Since 1953, fellowships have been awarded to professors in schools of public health in order to strengthen teaching in these schools. In addition visiting professors have dealt with such subjects as epidemiology, health education, biostatistics, and nutrition. Limited amounts of teaching materials have been provided.

Individual projects have now been developed for the majority of schools receiving international assistance. This project will afford the same type of aid for new schools of public health and those not covered by individual projects.

Provision is made for consultants and limited teaching supplies. Fellowships and a grant also are provided in 1963 and 1964.

AMRO-18, Medical Education (See page 266)

This program provides assistance to medical schools through the provision of short-term consultants; visiting professors; fellowships for teaching personnel; and travel grants to deans and senior faculty members for observation of teaching methods and curriculum planning.

It is a long-range project for improving medical education in Latin America and is closely coordinated with the activities of a number of non-governmental and bilateral agencies in the field of professional education.

The Medical Education Information Center operated by the Organization has been set up by agencies interested in medical education for the exchange of information. The activities of the MEIC have continued and the member agencies have manifested their satisfaction of the coordination provided.

An advisory committee on medical education meets periodically to advise the Director on the best way to approach the complex problem of medical education in Latin America. Provision of funds for these meetings and publication of these reports are also contemplated in this project.

Consultants services and participants are provided. In 1964, supplies and equipment are also provided.

AMRO-28, Advanced Nursing Education (See page 266)

The objective of this project is to assist governments in preparing graduate nurses for supervisory, teaching and administrative positions in schools of nursing, hospitals, and public health services by providing fellowships for attendance at advanced academic courses in nursing conducted in Latin America. Ten places in the School of Public Health in Santiago, Chile, are reserved annually for nurses from countries other than Chile. To date 50 nurses from 15 Latin American countries have been awarded fellowships in that course. In addition, Brazil, Colombia and Costa Rica already have or are establishing similar programs which will be used with increasing frequency.

Provision is made for participants.

AMRO-35, Fellowships for Health Services (See page 266)

Most fellowships awarded by the Organization are included as part of program development in individual projects. These allow for the training of personnel needed immediately for developing the planned activities.

Experience has shown, however, the difficulty of anticipating many requirements in training health personnel and specialists needed for developing certain public health programs. For this reason provision is made for meeting unforeseen requests.

Thus, 31 new awards, plus extensions to a number of other awards, were made in 1961 for the training of personnel from most countries of the Hemisphere. Provision is made for a similar program in 1962, 1963 and 1964.

AMRO-39, Environmental Sanitation (Advisory Committee and Consultants) (See page 266)

Meetings of the Advisory Committee were held in 1958, 1959 and 1961 respectively. With the rapid expansion and progress of the water supply program and with the activity about to be initiated in long-range planning by all Member Governments, continued assessment of the program and guidance by experts are necessary. Meetings of this Committee are proposed for 1963 and 1964.

Plans are for consultants and for limited supplies and equipment. Participation in these meetings by six Zone sanitary engineers and the engineer of the El Paso Field Office is also envisaged.

AMRO-45, Laboratory Services (See page 266)

There is a remarkable lack of uniformity in the levels of performance reached by both hospital and public health laboratories in the different countries of the Region, and in the different areas of each country. As the initial step for a plan to improve the situation in this field, a survey and inventory of the presently existing services is planned. The study should last approximately two years and once completed will serve as a basis to:

- a) determine adequate norms for the reorganization and expansion of laboratory services so as to ensure their proper relation to the rest of the health services in the immediate and far future;
- b) establish priorities for the improvement of laboratory services in the Region as a whole and within each country;
- c) write guides for the development of each of the main activities;
- d) determine the availability of consultants and training centers.

In addition to the survey, fellowships, and short-term consultants for specific aspects of public health laboratory work as needed in the countries are provided. Beginning in 1963 a laboratory consultant will be assigned to the project. Provision of biological reagents, cultures, and standards will be continued on a basis similar to preceding years.

AMRO-46, Seminar on Nursing Education (See page 268)

For several years seminars or workshops on various phases of nursing education have been held under this project. The first two were on principles of teaching and supervision; two were on curriculum planning; and a fifth discussed nursing surveys. The last two seminars brought together Directors of Schools of Nursing in 1960 for preparing a guide for basic nursing education in Latin America, and in 1961 to discuss the factors to be considered in the revision of the curriculum of schools of nursing to meet the need of the countries in which they are situated.

The 1962 seminar will consider programs for advanced nursing education; and in 1963 and 1964 (half of the countries of the Region participating each year) discussion will center on the training of auxiliary nursing personnel.

Provision is made for short-term consultants, for participants and for some supplies and equipment.

AMRO-50, Water Fluoridation (See page 268)

Fluoridation of water supplies is now being accepted as an effective and economical method of preventing dental decay. It is believed that many municipalities now employing alum coagulation for water treatment might initiate fluoridation by utilization of fluorspar which is found in several Latin American countries.

Provision is made in 1964 for short-term consultant services to advise municipalities on the type of equipment required and in technical considerations involved in the

various processes. Limited amounts of supplies and equipment are provided for demonstration purposes or pilot projects in countries that are willing to implement this activity.

AMRO-60, Smallpox Eradication (See page 268)

The aim of this project is to collaborate with the countries and territories of the American continent in a collective effort to eradicate smallpox. The first phase of this cooperative program consisted in promoting the production of high quality smallpox vaccine capable of withstanding adverse environmental conditions, particularly high temperature, without its basic properties being altered. Argentina, Bolivia, Brazil, Chile, Colombia, Cuba, Ecuador, Mexico, Peru, Uruguay, and Venezuela have the laboratories, equipment and qualified technicians to produce sufficient glycerinated and dried vaccine to cover their internal needs. PASB/WHO has provided supplies and equipment for developing these laboratories as well as fellowships for training the personnel in the large-scale production of lyophilized smallpox vaccine. In addition, it has placed at the disposal of the Governments the services of an internationally known laboratory that will test the purity and potency of vaccines produced by national laboratories.

In 1964 a seminar will be held at which an analysis will be made of smallpox eradication programs completed or under way, the means to be used for maintaining a high level of immunity in populations protected by intensive vaccination programs, and such other measures as may be advisable to prevent the reintroduction of smallpox in the American continent.

Provision is made for short-term consultants on dried vaccine production and the organization and development of local smallpox vaccination campaigns; for contractual services for the assay of vaccines (purity and potency) at the Statens Serum Institut in Copenhagen; for supplies and equipment in 1963 and 1964; and for participants in the seminar in 1964.

AMRO-62, Public Health Aspects of Housing and Urbanization (See page 268)

With the attention now being focused on housing, long-range planning, and urbanization in the Latin American countries, considerable urgency exists for the creation within Ministries of Health of suitable units capable of assessing and developing programs which insure maximum consideration of the public health aspects of these activities as they are undertaken. This is so because of the basic relationship between water supply, sewage disposal, and housing and because of the relationship of public health services to the long-range planning of communities.

As part of greatly increased activity in the field of housing and urbanization, PAHO is assisting governments in the long-range planning of communities and urban areas, the establishment of housing standards, and in the general promotion of projects which will ensure more rapid solution to the many problems created by sub-standard housing. To carry out this program, it is proposed to convene a seminar with certain of the European countries in 1963. Provision is made for participants from this region to attend the seminar.

Provision is also made for the services of a housing specialist for the technical guidance of Ministries of Health and housing agencies and Governments in the fields of design and planning as they relate to the public health implications of housing and urbanization. A second housing specialist will be added in 1964. In addition, provision is made for short-term consultant services, one secretary and limited supplies and equipments.

AMRO-63, Schools of Nursing (See page 270)

While several countries receive cooperation through individual projects for schools of nursing, other countries are aided in the field of nursing education only through fellowships. It is planned under this project to extend to countries not having individual projects various forms of professional assistance, such as services of short-term consultants; travel grants to senior members of nursing faculties; and distribution of copies of at least one textbook in Spanish to all schools of nursing in Latin America which meet certain minimum criteria.

Provision is made for short-term consultants, fellowships and the purchase of nursing textbooks.

AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine (See page 270)

During the past several years schools of veterinary medicine in most countries have been assisted in the reorganization of curricula and the incorporation of public health and preventive medicine into this teaching program. In addition a seminar on teaching of public health in schools of veterinary medicine was held in 1959, attended chiefly by deans of schools. Consequently, many schools of veterinary medicine are currently establishing a department or unit giving broader and more extensive courses in public health and preventive medicine. However, there remains a great need to strengthen the content of these courses at the undergraduate level. A second seminar is therefore planned for 1963 to be attended by a professor of public health from each school in the Americas. While the first seminar, attended in the main by deans concluded that each school should have a teaching unit in public health, the second seminar to be attended by professors directly responsible for this teaching will examine course content and numbers of teaching hours required to meet a minimum standard in such teaching.

Provision is made for participants and seminar costs in 1963, for fellowships in 1964, and for short-term consultants and teaching supplies in all three years.

AMRO-72, Dental Health (See page 270)

The aim of this project is to promote the development of dental health services in the countries, as an integral part of the overall health program.

Until now, considerable attention has been devoted to the training of dental public health administrators. The Organization and the W. K. Kellogg Foundation have collaborated with the School of Public Health of the University of Sao Paulo in setting up special courses for dentists. The Organization has provided 42 fellowships for dentists of 19 countries since 1958. This fellowship program has been very successful and many former fellows now occupy

key positions in the administration of the dental services in their countries. The Foundation has also cooperated in the translation into Spanish of a manual of dental public health developed at the University of Sao Paulo.

There are still needs for formal public health training and the international fellowship program will be continued. A new aspect of training is now being added: that of training dental personnel working in local health services in pilot centers in areas where integrated health projects are in operation. These centers would be able to provide pre-service and in-service training for dental personnel and short courses for training of auxiliaries.

Provision is made for fellowships, for advisory services by short-term consultants and supplies and equipment to be used in setting up such centers, one in 1963 and one in 1964.

AMRO-74, Plague Investigation (See page 270)

The recent increase in the number of plague cases in some American countries has demonstrated that the disease still represents a serious threat to this hemisphere. The disease is enzootic among wild rodents in Argentina, Bolivia, Brazil, Ecuador, Peru, United States, and Venezuela.

During the last few years, the Organization has been cooperating in anti-plague work and epidemiological studies in the endemic areas of Bolivia, Brazil, Ecuador, Peru, and Venezuela.

It is estimated that by 1964, it will be appropriate to hold a seminar on plague control for participants from the countries concerned. Provision also is made for short-term consultants for specific advice to countries on control methods.

AMRO-76, Vaccine Production and Testing (See page 270)

The purpose of this project is to stimulate the application of up-to-date techniques in the potency and safety of biologicals by national public health laboratories. Testing services for the control of such products have been obtained from the Organization's reference laboratories. An annual grant is made to one of these laboratories where the majority of the testing is done.

The Organization has also provided technical assistance to several countries in the development of vaccine production laboratories. As a support to an increased activity of the general health services in the use of active immunizing agents of human use (diphtheria and tetanus toxoids, pertussis vaccine, typhoid vaccine when indicated, etc.), consultant services will be provided in 1963 and 1964 to assist national laboratories to manufacture those biological products on a sound technical and economic basis, in addition to the contractual services mentioned above.

AMRO-77, Pan American Foot-and-Mouth Disease Center  
(See page 272)

Foot-and-mouth disease causes great economic losses in the cattle raising countries of South America which are seriously affected. In addition the disease results in

further depletion of the protein resources available to populations which are already undernourished. To aid in the solution of this problem, the Pan American Foot-and-Mouth Disease Center was set up in 1951 near Rio de Janeiro with funds from the Program of Technical Cooperation of the OAS.

The Center trains field and laboratory personnel working on foot-and-mouth disease; provides diagnostic and virus-typing services; advises on prevention, diagnosis, control and eradication of foot-and-mouth disease and related diseases; provides international coordination and collaboration necessary for successful inter-country and regional activities; and conducts research in development of better vaccines against foot-and-mouth disease, in improvement of methods of diagnosis and virus-typing, in basic studies on other vesicular diseases and in making epizootiological studies.

Estimated requirements for 1963 are for 126 employees and in 1964 for 130. Other expenses for operating the Center have been included in the proposed program and budget.

Except for the land and building, funds for utilities, as well as some local labor provided by the Brazilian Government the entire program is financed by the Technical Cooperation Program of OAS.

#### AMRO-81, Pan American Zoonoses Center (See page 274)

The Pan American Zoonoses Center was officially inaugurated on April 25, 1959. Although it was founded in August 1956, the inauguration served to underline the fact that it had completed the initial stages of its development and was actively engaged in a diversified program of support for the countries of the Americas in their efforts at control and eventual eradication of zoonotic diseases. During 1959 and 1960, a broad education program was carried out, numerous services were provided to the countries, and research was conducted on several zoonoses problems.

During 1961, the annual advanced course in zoonoses and a special course on laboratory methods for leptospirosis were held. Postgraduate students from several countries completed programs of special training for periods of up to one year. A field evaluation of a vaccine for use against caprine brucellosis, a study on the existence of ovine brucellosis, and a position-paper on bovine tuberculosis and its public health importance in the Americas, were completed. Field demonstrations and evaluation studies on the use of special vaccines for the control of bovine rabies, leptospirosis and anthrax were continued. Active assistance was provided in carrying out a pilot program of brucellosis control. A survey of the Q fever problem was initiated in cooperation with national authorities in six countries. Epidemic-aid service was provided as requested for the investigation of an outbreak of human leptospirosis and in the study of the role of *Salmonellae* in an outbreak of infant diarrhea. With the support of a research grant from the National Institute of Health, work was started on studies for the prevention of hydatidosis in man through the development of improved methods for treating infected dogs.

A quarterly information bulletin on the study and control of the zoonoses was prepared and distributed. Other services to the countries included reference testing of vaccines and diagnostic antigens, distribution of standard strains of virus and bacteria for making and testing antigens and vaccines, reference diagnosis, and consultation on numerous problems concerning the zoonoses.

Planned activities include the continuation of the graduate student program with a continuous, but rotating, group of four long-term fellows, special training courses on brucellosis and leptospirosis, and an inter-country meeting to coordinate diagnostic procedures for tuberculosis and brucellosis. Consultation, advisory and laboratory services, field surveys and investigations, and related activities will be continued. Research on zoonoses problems of special interest from the standpoint of control and prevention will be undertaken in accord with the funds that become available.

The salaries of non-professional local personnel and operating costs are borne by the contributions of the Government of Argentina.

Provision is made for the five international staff of the Center (including the Director) and for supplies, equipment, and common services.

#### AMRO-85, Latin American Center for Classification of Diseases (See page 276)

The Latin American Center for Classification of Diseases was established in 1955 in collaboration with the Government of Venezuela. The objectives of the Center are to study problems of medical certification of causes of death; to assist in the improvement of medical certifications in Latin America; to give detailed instruction in coding diseases and causes of deaths; to ensure comparable coding procedures in the Americas; to serve as a clearing center for handling of problems arising in the application of the Spanish edition of the Manual of the International Classification of Diseases, Injuries and Causes of Death; and to assist in the 1965 Revision of the Classification to ensure satisfactory inclusion of diseases and conditions of importance in the Americas and terminology in use in Spanish-speaking countries.

The Center provides instruction in the use of the Classification and conducts annual short training courses in coding. Through 16 courses, 356 persons have received training in classification in Spanish.

The Center expanded its instruction in 1961 to include coding of hospital diagnoses. The publication of "Clasificación Internacional de Enfermedades Adaptada para Índice de Diagnósticos de Hospitales y Clasificación de Operaciones," in 1961 makes possible greater use of the Classification in hospitals throughout Latin America.

Also the work program of the Center is being directed to the preparation of the 1965 Revision of International Classification; to the development of a more nearly satisfactory Classification for Spanish-speaking countries, and to solution of problems of medical terminology and nomenclature. In these efforts, the Regional Advisory Committee on International Classification of Diseases is playing an important role. Financial assistance is provided for the Center in the form of a grant for an instructor and his travel through 1963, fellowships for an annual course, and for short-term consultants to visit countries to study medical terminology for inclusion in the revision. The Venezuelan Government is also providing financial support to this project, viz: full-time Director, clerical assistance and offices.

AMRO-87, Endemic Goiter Prevention (See page 276)

Although numerous countries have already enacted legislation on salt iodization, few have carried out endemic goiter control programs either at the national or the local level.

In view of the seriousness of the endemic goiter problem in the Americas, it is hoped to stimulate salt iodization programs by organizing a seminar in cooperation with the Endemic Goiter Committee of Argentina.

Provision is made in 1964 for the attendance of participants at this seminar and for a short-term consultant.

AMRO-88, *Aedes aegypti* Eradication (See page 276)

In the 15 years elapsed since the Directing Council entrusted PASB with the promotion and coordination of the *Aedes aegypti* eradication campaign in the Americas, many of the countries and territories have achieved the elimination of this vector, and in many others the campaigns under way are in varying stages of development.

The following countries and territories have been declared free from *A. aegypti* infestation by the governing bodies of the Organizations: Bolivia, Brazil, Canal Zone, Chile, Costa Rica, Ecuador, El Salvador, French Guiana, Guatemala, Honduras, Nicaragua, Panama, Paraguay, Peru and Uruguay. But there are still countries and territories that have not even begun their campaigns, or have interrupted them, or in which progress is very slow and results unsatisfactory. The problem persists mainly in the United States and in certain parts of the Caribbean Area.

As the *A. aegypti*-free areas increase, there is an increasing need to initiate programs where as yet none exist and to accelerate those programs that are lagging behind, because the latter hold the threat of becoming sources of reinfestation for other countries and territories that have already eradicated the mosquito at the cost of great effort and sacrifice.

The Directing Council at its XIII Meeting (October 1961) reiterated its recommendation that all countries which have not yet initiated the eradication activities or whose programs are progressing satisfactorily or are in the final stage, accelerate their activities, so that all countries may complete the campaign within a five-year period and be able to report the eradication of *A. aegypti* to the XVII Pan American Sanitary Conference in 1966.

Provision is made for short-term consultants, and for supplies and equipment. In addition, provision is made for an entomologist in 1962 and in 1964.

AMRO-90, Malaria Technical Advisory Services (Interzone)  
(See page 278)

The purpose of this project is to provide technical advice and assistance in specialties common to malaria eradication programs to Governments.

An entomologist provides advice and assistance on entomological problems, including determination of vectors and ecology, special studies for control of anophelines, preparation of guides and manuals for field programs, over-all coordination of field programs relating to entomology in malaria eradication, and assistance in teaching as requested.

A parasitologist provides advice on laboratory procedures, including equipment and supplies, standardized diagnostic techniques in malaria eradication, manuals of procedures, and such teaching duties as may be required.

A vehicle management and maintenance consultant (administrative officer) is concerned solely with the specialized problems involved in the efficient and economical management of large fleets of motor vehicles.

Provision is made for the 3 posts mentioned above, for short-term consultants, for supplies and equipment and for common services. In addition, beginning in 1963 there will be a second parasitologist, a health educator, and three administrative methods consultants including a second specialist in fleet management.

AMRO-94, Diarrheal Diseases in Childhood (See page 278)

This project is designed to clarify the rather obscure relationship existing between the severity of diarrheal diseases and nutritional deficiencies, especially in children under five years of age. Epidemiological studies are being conducted, in collaboration with INCAP, to investigate this problem.

Provision is made for a statistician and a bacteriologist to work in these studies.

AMRO-101, Course for Medical Librarians (See page 278)

There is a great need for the preparation of adequate librarians for the schools of public health and medical schools in Latin America.

A course for Latin American medical librarians is planned at the School of Library Science in Medellin, Colombia. The duration of the course will be 10 weeks and the instruction will be given in Spanish. Provision is made in 1964 for fellowships for librarians of medical schools and schools of public health to attend.

AMRO-110, Tuberculosis Control (See page 278)

The introduction of drug therapy, particularly isoniazid, has changed the public health approach to the tuberculosis problem. Large-scale applications of chemotherapy and chemoprophylaxis on an ambulatory or domiciliary basis are leading to a considerable lessening in the need for isolation of patients in hospitals. The resulting reduction in the cost of tuberculosis programs makes it economically possible to extend them on a nation-wide scale to countries so far unable to afford the high costs of extended hospital construction and maintenance. The Organization is providing advisory services and training for national programs in several country projects.

To furnish consultant services where there is no country project, provision is made under this project for short term consultants, and in 1963 and 1964 for holding seminars on tuberculosis prevention and for fellowships.



AMRO-112, Community Development Training Center  
(See page 278)

The Regional Training Center in Community Development is operated in Michoacán, Mexico, as a joint collaboration of various specialized agencies of the United Nations, under the general leadership of UNESCO. The increasing importance of community development in this Region as a part of the drive toward social and economic improvement, and the vital contribution which health services can make in community development form the basis for PAHO/WHO participation in this training center. A medical officer is assigned as a consultant with major responsibilities in health training of students in community development. A limited quantity of supplies is also provided.

AMRO-121, Malaria Eradication Evaluation Teams  
(See page 280)

As the eradication campaigns approach their completion, the need increases for developing methods through which the true status of malaria in the various countries can be ascertained with precision.

This requires the existence of one or more teams devoted to the various phases of evaluation, either to study and assess local information or to investigate directly the epidemiological evidence under certain special circumstances.

The principal objective of this project is to confirm whether the evidence that malaria has disappeared is valid. However, there are also doubtful situations other than those of accomplished eradication, in which the opinion of the evaluation team is required, as for example the decisive moment of interrupting the sprayings and starting the surveillance phase.

Provision is made for services of one team comprising one chief of evaluation team and one parasitologist, to be supplemented with a second team beginning in 1964. Provision is also made for a limited amount of supplies.

AMRO-135, Malaria Eradication Trainees (See page 280)

Owing to the shortage of experienced workers in malaria eradication in the Americas, the Organization has trained its staff members in malaria eradication techniques in order to carry out its functions of providing technical advisory services in this field.

Provision for trainees in 1962 is limited to the number that might be required from normal turnover of technical staff. In 1963 and beyond it should be possible to meet additional needs for staff through reassignment of personnel from projects being terminated.

AMRO-142, Health Aspects of Radiation (See page 280)

The utilization of nuclear energy as a cheap source of energy for multiple purposes and as a valuable tool in medical diagnosis, therapy and research introduces the possibility of innate hazards *per se* and of misuse. Some countries of the Hemisphere have already begun to use fissionable materials in both industry and medicine. The availability and use of this new massive source of radiation requires the establishment of safety standards for use of all sources of ionizing radiation, including X-rays, which have not heretofore been subjected to careful control.

Under this project the Organization will assist the Governments: (a) to adopt international standards and to develop procedures and regulations for radiation protection in the use of X-rays and radioisotopes including the disposal of radioactive wastes; (b) to promote teaching of basic health physics and radiation protection, especially from the ecological and epidemiological aspects, in the professional schools; (c) to use radioisotopes for medical diagnosis, therapy, and research; (d) to encourage research in those applications of radiation which may have medical, public health and veterinary significance.

The Organization will provide courses for training of para-professional personnel who will be working in newly organized radiation protection health services, and international courses will be promoted at existing centers in the Americas where professional personnel may receive instruction on the medical uses of radioisotopes. In addition fellowships will be provided for the training of radiation protection health officers for service with health departments.

In order to fulfill the Organization's obligations in providing the necessary assistance in major fields of activity, short-term consultants will advise and assist governments in the development of safety programs involving the use of radioactive materials and X-ray as well as radioactive waste disposal. Advice will likewise be available in connection with developing radiation protection health regulations and the administrative and legal bases for implementing these protective measures.

Provision is made for short-term consultants and also for fellowships, teaching supplies, and conference services.

AMRO-149, Leprosy Control (See page 280)

The survey to determine the extent of the main epidemiological characteristics of leprosy in the Americas was completed in most of the countries where the disease exists and where complete information on this matter was lacking.

The leprosy control programs are at various stages of development in the different countries of the hemisphere; in some they are more or less advanced; in others they are just beginning; and a third group is preparing to initiate such activities.

It is proposed to hold a seminar in 1963 for the purpose of analyzing the control programs under way, comparing the technical and administrative methods applied in carrying out programs, and measuring the results obtained. At the same time it is proposed to standardize the basic epidemiological approach to leprosy and to draw up a uniform system of periodic reports.

Provision is made for short-term consultants, for fellowships for professionals in charge of leprosy control programs, and for the holding of the seminar in 1963 and the attendance of participants.

AMRO-150, Food and Drug Services (See page 282)

In most countries of the Americas, the services for the testing, control and registration of manufactured food and therapeutic substances are in need of reorganization and revision and most of the existing legislation is outdated. Registration varies from a perfunctory review of applications and issuance of licences, to a long and time

consuming procedure for submission of information and samples and payment of fees. Once licensed, the drugs are not always subject to retesting of samples gathered in the field.

This project makes provision for short-term consultants (2 full time consultants in 1962) to study present conditions and facilities and to make recommendations for changes and improvements in control services, laboratories, and legislation. Fellowships, both long-term and short-term, are also provided for the training of key personnel for specialized work in the national services.

In addition, in 1964, provision is made for a "Seminar on the Examination and Control of Pharmaceutical Preparation", tentatively scheduled for Panama. From each of the countries that has, or is prepared to, implement a drug control service, participants will be invited to the Seminar. Special consultants will be used to prepare for this Seminar and to be discussion leaders.

AMRO-151, Seminar on Teaching of Sanitary Engineering in Schools of Engineering (See page 282)

Because of the increasing demands for assistance to engineering schools and the importance placed on the preparation of technical personnel to meet the needs of the next ten years, a long-range project for improving the quality and numbers of sanitary engineers is proposed. In 1964 a Seminar on Teaching of Sanitary Engineering at the graduate level will be held. Provision is made for participants, short-term consultants and conference costs.

AMRO-152, Seminar on Schools of Public Health (See page 282)

Faculty members from schools of public health have experienced common problems in developing their programs for professional training in public health. In order to profit from one another's experience and practice, directors and key faculty members of eight schools of public health in Latin America met in Mexico in 1959. The report of the meeting has become a significant document which is being widely used. A second meeting was held in 1961, and experiences with implementation of the recommendations of the meeting in Mexico were discussed. In addition, teaching of biostatistics in Schools of Public Health was reviewed in detail as to types of courses, curriculum and staffing. A similar meeting is to be held in 1963 in Sao Paulo, Brazil and the teaching of public health administration with special emphasis on the social sciences will be examined.

Provision is made in 1963 for short-term consultants, for participants and for conference costs.

AMRO-155, Schistosomiasis Control (See page 282)

Schistosomiasis is a serious public health problem in Brazil, Puerto Rico and Venezuela, and also exists in other areas. This disease is increasing in distribution and incidence with the extension of irrigation projects and the migration and concentration of human populations.

Studies already undertaken have produced new and encouraging information on methods of dealing with problems

created by this disease. Further work is needed, however, to appraise information so far collected, and to stimulate studies and research in the affected countries so as to devise more effective methods of diagnosis, control and prevention of the disease.

This project makes provision for specialized consultants to continue field research. In addition, technical consultation will be provided to countries and assistance given in the setting up of a snail identification center to ensure proper nomenclature of molluscan intermediate hosts; and in the training of personnel in various phases of schistosomiasis control.

The project will provide short-term consultant services in 1962 and 1964 in addition to a grant to the identification center in 1963 and 1964.

AMRO-156, Training Program in Hospital Statistics (See page 282)

One of the chief sources of basic data for health planning is the hospital. Birth and death certificates and reports of notifiable diseases are often completed in hospitals. In many countries hospitals are operated by national health services, and data on patients treated and services rendered are needed in order to develop an efficient hospital program. To provide these essential data, the medical and administrative records in hospitals and the procedures followed in processing these records must be well developed.

In Latin American countries, opportunities for training medical records librarians have not been developed in order to meet the needs in this field. The Organization plans to establish a Latin American Training Program in Hospital Statistics. Several hospitals including a university hospital are to be used as demonstration centers for the training of medical record and hospital statistics personnel. This program would provide training for personnel who would in time be used in their home countries to train national hospital staff. The needs in many of the countries will be sufficient to justify such training within the country.

To implement this program, a demonstration center and initiation of plans for a training program began in Argentina in 1961. Training courses are now being developed and later fellowships will be awarded for attendance from other countries. Teaching materials are being developed in Spanish for elementary short courses.

In addition hospital statistics consultants render specialized services for the improvement of record-keeping systems and hospital statistics in several hospitals in Latin America requesting such services, particularly in university hospitals where it is especially important.

Provision is made for one medical record librarian, short-term consultants in hospital statistics and some supplies and equipment. Fellowships are also provided.

AMRO-160, Yaws Eradication and Venereal Disease Control (See page 284)

In accordance with the mandate received from the Governing Bodies of the Organization, the yaws eradication programs have been given high priority which will have to be maintained until such time as the disease is eliminated

from the Hemisphere. The existing programs are at varying stages of development; some are advanced and nearing completion; others have only recently been initiated or are not developing as rapidly as they should. The Organization must therefore continue to cooperate in the operation of these programs so as to develop the ones that have been recently initiated and to accelerate those that are retarded. The evaluation of yaws eradication programs, especially the final evaluation and estimate of the problem where its magnitude is not yet known, are matters of concern to the Organization.

Provision is made for the continuation of the services of a medical officer and beginning in 1963 those of a laboratory technician who will work together with the statisticians of the Zone Offices and the auxiliary personnel provided by the interested countries.

Provision is also made for short-term consultants to cooperate with the countries and territories with eradication programs under way, as well as for fellowships for yaws eradication program personnel.

The need to expand the venereal disease control activities that the Organization has been developing is evident. The countries are asking for the cooperation of the Organization in a study of their present agencies in charge of venereal disease control and for advisory services for planning modern agencies capable of dealing successfully with this problem. Equally frequent requests have been received for cooperation in the training of specialized personnel. In addition to the provisions outlined above for the yaws programs, provision is made for short-term consultants, fellowships and a limited amount of laboratory supplies and equipment for venereal disease programs.

#### AMRO-165, Nutrition Advisory Services (Interzone) (See page 284)

Experience has shown that to meet the needs of the governments in the matter of nutrition, it is necessary to have an adviser in each individual Zone. The pertinent provision has been made for Zones I, IV, and VI. The Director of INCAP provides advisory services for Zone III. This program offers this type of services to the other two Zones. Training of personnel at the various levels is basic to the development of the nutrition program. The Organization, in collaboration with FAO and UNICEF, has been organizing various permanent training centers. It is expected that by 1963 four such centers will be operating.

Provision is made for fellowships and for short-term consultants to assist in developing courses, as well as for two nutrition advisers.

#### AMRO-181, Live Poliovirus Vaccine Studies (See page 284)

Attenuated strains of the three known types of poliovirus have proved safe and effective in extensive laboratory experiments and in progressively larger trials in man under field conditions. The Organization has sponsored large-scale, community-wide vaccination trials with all three types of attenuated poliovirus.

Approximately two million persons, mostly children, have received the live poliovirus vaccine in different countries of the Americas, without any untoward effects attributable to the vaccines. Of this total, nearly 1,500,000 individuals were vaccinated in programs sponsored

or assisted by the Organization. To carry out serological and viral studies connected with field trials, a Tissue Culture Laboratory, set up with the assistance of the Organization at the Universidad del Valle, Cali, Colombia, operated as a collaborative laboratory of the Organization for poliomyelitis vaccine studies and also was used for the training in tissue culture techniques as applied to virology. Future activities will be also devoted to assist the countries in the development of virus diagnostic laboratories.

This project, which is financed by a grant from the American Cyanamid Company, provides for two virologist consultants until mid-1964. Provision is also made in 1962 and 1963 for laboratory supplies and equipment.

#### AMRO-183, Nursing Midwifery (See page 286)

Midwifery services in Latin America are provided to a great extent, especially in rural areas, by the traditional birth attendant (partera empírica). To improve maternity services, a number of countries have prepared and assigned to health services, public health nurses and public health nurse-midwives whose responsibilities include the orientation and guidance of the traditional birth attendant. It is anticipated that such activity will continue.

A number of countries also employ professional midwives in both maternity hospital services as well as in health services, but because the existing schools of midwifery do not offer orientation in nursing, in public health nor in maternal and child health in its broad sense, the professional midwife is not prepared to function as effectively as she might in the rapidly expanding integrated services.

Where educational facilities exist for the preparation of the professional midwife, there is a need for guidance in ways and means of improving existing educational facilities as well as services where professional midwives are employed.

In order to continue this service and to further extend it, provision is made for the continuation of a nurse-midwife, for fellowships and for a limited amount of supplies and equipment.

#### AMRO-185, Medical Care and Hospital Organization (See page 286)

Medical care must at all times be regarded as one of the basic services of an integrated health plan. It therefore needs to be carefully planned by studying, using, coordinating, and creating material and human resources to make up flexible and integrated systems. Special importance should be given to the organization of out-patient and ambulatory care. Renewed and modern medical care principles require selected personnel, which have been trained and oriented toward the goals in view and which possess those psychological and sociological traits which must be investigated as a basis for the better planning and execution of such a new system, with the support of the community. The aim of this project is to stimulate and assist the countries in giving medical care its rightful place among general health activities.

Provision is made for short-term consultants in health administration, medical care, public health nursing and hospital services, for fellowships, and for supplies and equipment.

AMRO-187, Promotion of Community Water Supplies  
(See page 286)

With the highly significant progress which has been made in 1960 and 1961 in the field of water supply throughout Latin America, and with the recognition given to this program by the Act of Bogota, the Charter of Punta del Este, and by the policies recently established by the Inter-American Development Bank, it is apparent that the water supply activity during 1962, 1963 and 1964 will assume ever-increasing volume and that demand by governments to the Pan American Health Organization for assistance will also continue to increase. It is of interest to note that during the years 1960 and 1961 assistance has been given to every one of the Latin American countries in some phase of water supply and that by early 1962 over \$135,000,000 worth of loans had been approved by the Inter-American Development Bank for water supply construction. It is also important to note that major changes in water supply organizations took place in at least five of the countries with the objective of establishing organizations which would be self-autonomous and to permit the maximum opportunity for the self-financing of water supplies and the good management which must go along with such an operation.

Continued assistance to governments will be given in the field of water supply through the provision of full-time staff engineers, through the assignment of short-term consultants, and through the services of the entire field and headquarters engineering staff. Provision is also made to assist governments in clarifying any questions that the international lending agencies may have in regards to requests for loans.

To carry on these activities provision is made for short-term consultants in all phases of water supply as well as for a water supply design specialist, a finance and administration specialist, and a clerk-stenographer.

AMRO-196, Insecticide Testing Teams (See page 286)

The appearance of resistance to chlorinated hydrocarbons by anopheline vector species raises the important question of alternative insecticides to interrupt malaria transmission. Both in the Americas, and in other regions, there is increasing interest in and need for testing of other types of insecticides, such as the organo-phosphorus group, in both the laboratory and the field.

In El Salvador, Guatemala, Honduras, and Nicaragua, *A. albimanus* from certain areas is resistant to both DDT and dieldrin. Cooperative studies by the National Malaria Eradication Service of El Salvador, the United States Public Health Service, and the PAHO were made in 1959 to determine the effectiveness of two organo-phosphorus insecticides against the vector. The results indicated that the period of residual activity was rather short. Similar studies with other promising new insecticides are required for this doubly-resistant strain, and for other vector species under varying environmental conditions elsewhere. As other insecticides become available, one or more teams should be in existence, trained and equipped to carry out the tests that are needed.

In other areas where vectors are still susceptible to the chlorinated hydrocarbon insecticides, there is an urgent need for complementary studies to determine with more precision the effective residual life of these compounds under a variety of circumstances, and the reactions, such as irritability, which may block the full effect of the insecticide on the vector. In order to proceed with these studies two teams are presently organized, one in

El Salvador and the other in Bolivia. Each team consists of one entomologist and one auxiliary entomologist, plus local personnel as required in each instance. The teams are led by a senior entomologist. Their functions are to assess the effectiveness of various insecticides, formulations, and application rates against a variety of vectors, on all existing types of surfaces in a variety of locations.

Provision is made for this personnel, national and international, common services, and supply requirements of the teams.

AMRO-197, Research on the Resistance of Anophelines to Insecticides (See page 288)

Resistance to chlorinated hydrocarbon insecticides among anophelines in the malarious areas of the Americas was first demonstrated in 1958. Such resistance has been reported from 15 countries and 3 other political units, and 10 species are involved. Certain basic laboratory studies of genetics and physiology are being carried out at the School of Hygiene and Public Health of the Johns Hopkins University. The field work is being carried out as a normal part of the Bureau's activities.

The studies are expected to terminate in 1962.

AMRO-198, Administrative Methods and Practices in Public Health (See page 288)

In addition to technical competence, sound administration and business methods are fundamental for the effective and economical operation of national health establishments. Assistance in this field has been given by the Organization in the form of consultative services and fellowships and through the sponsorship of seminars and technical discussion groups.

In 1957 the Directing Council, in Resolution XXXV recommended that the Member States give attention to the improvement of administrative practices related to public health programs. It also instructed the Director of the PASB to collaborate with the governments in matters concerning administrative methods and procedures in public health services.

Provision is made for continuation of an administrative methods officer and a technical assistant as well as for supplies.

AMRO-220, Malaria Eradication Epidemiology Teams  
(See page 286)

As residual house spray programs for malaria eradication are not everywhere capable of interrupting transmission of the disease, there is a pressing need to determine the causes of such persisting transmission in areas where its interruption has not been accomplished within the expected time. In order to determine these causes, epidemiological studies of typical localities and areas with continued transmission must be made in detail. Epidemiological personnel, skilled in the techniques for appraising probable causes of transmission, are required in increasing numbers.

In order to assist governments in carrying out these epidemiological investigations, and to train both national

and international personnel in malaria eradication epidemiology two teams will eventually be organized. The first was organized in 1960. Each team will be composed of a medical epidemiologist, an entomologist, and a parasitologist. The teams will ascertain the extent of persisting transmission within limited areas, investigate the causes thereof, evaluate possible control methods, develop and perfect new techniques for ascertaining causes and evaluating control measures, and carry out the training of national and international personnel in these investigative methods.

The first team is now based and working in El Salvador. The other team will be based as needs become more apparent. Provision is made for two medical officers, one parasitologist, in 1962, two entomologists, and one auxiliary entomologist, as well as locally employed personnel to support the teams. Provision is also made for supplies and equipment and for common services.

AMRO-234, Sewage Disposal and Water Pollution Control  
(See page 288)

In any city, whenever the problem of water supply is confronted, it is necessary at the same time to consider sewage and waste water disposal. This is not to say that both systems must be constructed simultaneously although, wherever possible, this should be done. It is also evident that in most of the countries where increasing consideration is now being given to industrial wastes, stream pollution will become increasingly aggravated. Ministries of Health have major responsibilities in every country for promoting and enforcing measures directed at the prevention and control of stream pollution.

The Organization is convening in 1962 a symposium on "New Developments in Sewage Disposal" (AMRO-275). At this symposium consideration will also be given to the long-range planning implications of sewage disposal with major emphasis given to development of solutions which can be carried out at a minimum cost.

Cooperation in the development of master plans for sewerage systems in all municipalities where water projects are being considered and in the solution of major problems which develop in connection with design, financing, organization, administration, and management of such systems will be provided through short-term consultants and the regular staff. Provision is also made in 1963 to permit publication of a manual which will contain basic information on sewage disposal and sewage system financing and management.

AMRO-235, Food Sanitation (See page 290)

Problems relating to food and milk sanitation exist in every country of this Region. The activities carried out by Ministries of Health to improve these problems vary depending upon the priority placed on the various environmental programs. The Organization provides advisory services to Governments on specific problems and assists in the training of personnel in programs associated with proper sanitation control. In 1951 work was initiated on a guide to serve as a reference to Governments interested in developing food sanitation programs. This guide is expected to be reviewed and tested in 1963 and 1964 and available in 1964 for general distribution.

Provision is made in 1963 and 1964 for short-term consultants and supplies.

AMRO-236, Refuse and Garbage Disposal (See page 290)

Because of the relationship between good refuse and garbage disposal practice to the public health and the increasing interest in this activity as it relates to municipal cleanliness, fly and rodent control, and economics, more emphasis is being given by Governments to the solution of problems in this field.

The XII Directing Council in its final report, using the information presented at the Technical Discussions, requested the Organization to assist the Governments through consultant services and also in the interchange of ideas between Governments on this subject. Provision is therefore made to assist Governments during 1962, 1963, and 1964 through consultant services, and in 1963 and 1964 to provide fellowships for personnel in the agencies of Government responsible for garbage and refuse collection to visit other countries and to discuss mutual problems. In 1964, provision is also made for a meeting to plan a regional seminar in 1965.

AMRO-240, Seminar on Public Health Nursing Services  
(See page 290)

The increased utilization of prepared nursing personnel at all levels has brought nurses into planning and policy-making activities within national health services. Seminars are being held for key nurses to examine common problems related to the development and extension of nursing services, in-service training of all levels of nursing personnel, utilization of records and reports to improve service and guide nursing staff, provision for supervision, and cooperation with schools of nursing and other institutions to provide field practice areas for undergraduate nursing and auxiliary personnel and for graduate health workers.

The first seminar designed to give such assistance to key nurses from both hospital and public health services was held in El Salvador in 1961 (AMRO-213) with nurse-participants from Central America, Panama, and Mexico. The second seminar in Uruguay in 1962 provided for participants from South America. The third seminar will be held in 1963 in Jamaica for the English-speaking areas of the Region, and in 1964 in Mexico for participants from Haiti, Cuba, the Dominican Republic, Central America, and Panama.

Provision is made for short-term consultants, participants, supplies and equipment, and conference costs.

AMRO-241, Advisory Committee on Statistics  
(See page 290)

The first meeting of the Advisory Committee on Statistics was held in 1960 to analyze current policy, objectives, and accomplishments, and to suggest new ways of solving present problems and of fulfilling the objectives of the Organization. Several activities recommended by this Committee have been initiated, such as the teaching of medical statistics in Sao Paulo, Brazil; regional epidemiological research program (AMRO-266); regional activities in preparation for the 1965 Revision of International Classification of Diseases (AMRO-261).

The second meeting of the Committee is scheduled for 1962 for planning in accordance with the Charter of Punta del Este to meet the goals and for evaluation of the accomplishments especially in new programs such as

teaching of medical statistics, statistical and epidemiological research, and progress in Eighth Revision plans.

The third meeting is planned for 1964. Provision is made for the meetings in 1962 and 1964.

AMRO-242, Seminars on Water Supply Design, Construction and Management (See page 290)

In 1960 a seminar was held to develop understanding of water rate structures and financing of water systems (AMRO-244). To continue assistance to Governments in the technical and administrative phases of the water program, a seminar on the design and construction aspects of water supply systems is planned for 1962 to provide for an exchange of information and experiences under conditions in Latin America. It will be directed toward the development of methods and mechanisms for reduction of construction and operating costs through improved design and construction techniques.

Provision is made in 1962 for short-term consultants, participants, and supplies for the seminar.

AMRO-243, Conference on Development of Water Supplies (See page 290)

Because the success of the water program, whether measured in terms of health or economics, rests in large part upon understanding its basic principles, great importance is placed on presenting sound information to high governmental officials on the water supply program. To meet part of this need and to encourage interagency and inter-ministerial cooperation, a regional conference is planned in 1962. In this, officials of health and public works ministries and other agencies concerned will confer on problems of national water programs and approaches to the solutions of problems.

Provision is made in 1962 for the costs of the conference, participants, and short-term consultants.

AMRO-247, Teaching of Statistics in Medical Schools (See page 290)

At the South American Conference on Teaching of Medical Statistics and other meetings in 1958, a program was recommended for preparation of professors of medical statistics. A short course was recommended for 30 members of faculties of medical schools. A training grant was awarded by the U.S. National Institutes of Health for the first course of six weeks given by the Faculty of Hygiene and Public Health of the University of São Paulo in 1961. Fifty-two persons attended this course from 12 Latin American countries. Around half of these will be invited for a more advanced course in 1962. Fellowships are provided in large part under the training grant.

The Organization participates by provision of teaching consultants.

AMRO-251, Filariasis (See page 292)

Filariasis, including onchocerciasis, is recognized as an important public health problem in some countries of the Region; in others, little or no information is

available on the existence or prevalence of these diseases. In general, insufficient attention has so far been given to their control and prevention. Furthermore, insufficient ecological data exists on the American simulum vectors.

This project provides short-term consultant services in 1962 to assist the countries as requested.

AMRO-256, Industrial Hygiene (See page 292)

Plans for economic development are being undertaken by many nations in Latin America in an effort to raise the standard of living of their people. Industrialization always brings with it many health problems for the workers and necessitates at the outset the simultaneous development of occupational health programs.

Studies of industrial hygiene problems in 13 countries have shown that the losses from industrial disabilities amount to approximately 15 per cent of the national incomes for these countries.

For this work there will be needed trained industrial hygiene personnel supported by the essential laboratories which can evaluate the health problems in industry and develop the means for their control.

To permit greater activity in this field, a Regional Adviser in Industrial Hygiene was employed in 1961 and provides consultant service to the Member Countries from his duty station in Santiago, Chile.

Additional short-term consultant services for specific problems in industrial hygiene are being made available. In 1963, provision is made for a regional symposium to be attended by 20 participants. Fellowships and the services of a secretary are also provided.

AMRO-257, Seminar on Dental Education (See page 292)

Dental schools in Latin America have not yet applied many of the newer developments in dental education and there have been few opportunities for broad discussion of major problems of common interest to dental education and public health. Seminars to discuss curriculum organization, teaching of preventive dentistry, education of the dentist and adequacy of the training provided, are to be held in 1962, 1964, and 1966. Each seminar will be for a different group of countries.

The first seminar, to be held in Bogota in October 1962, will be for Zone IV countries plus Venezuela and Chile. The 1964 Seminar, to be held in Guatemala, will be for countries of Zones II and III.

The project is jointly sponsored by the Organization and the W. K. Kellogg Foundation. Provision is made for the seminars in 1962 and 1964; publication of the First Seminar proceedings in 1963; and short-term consultants in 1962, 1963, and 1964.

AMRO-261, Advisory Committee on International Classification of Diseases (See page 292)

In order to initiate regional activities directed towards the 1965 Revision of the International Classification of Diseases, the first meeting of an Advisory

Committee on Classification was held in 1961. Classifications of nutritional diseases, infective and parasitic diseases, and diarrheal diseases were suggested (Scientific Pub. No. 53). A program of work in the Region was recommended in which committees on classification would be established in the various countries and consultants of the Organization would render services. Studies on terminology and trials would be undertaken in the countries in accordance with suggested procedures of the Latin American Center.

A second meeting of the Committee is scheduled for 1962 following the meeting of the Regional Advisory Committee on Statistics (AMRO-241). The third meeting will be held in 1963 to review suggestions for submission to WHO Headquarters for the Draft Revision. In 1964 intensified work will be carried out on the Draft Revision with a fourth meeting for consideration of all the suggestions for regional recommendations to Headquarters.

Provision is made for temporary advisers in 1963 and 1964.

AMRO-266, Regional Development of Epidemiological Studies  
(See page 292)

The Organization received a grant from the National Institutes of Health of the U.S. Public Health Service for the regional development of epidemiological studies. The objective of the initial study is to obtain accurate and comparable information on causes of death in approximately ten selected cities of the Americas. Death rates based on these data by causes, age and sex will serve as the basis for developing epidemiological studies and research programs, as well as in guiding health planning.

This study entails assembling complete clinical histories, including laboratory and pathological findings, of deaths in the age group 15-74 years in the selected cities. Based on this information, causes of death will be assigned uniformly for all cities in accordance with international procedures. A meeting of investigators from the cities participating in the cooperative study was held early in 1962 to clarify details of the protocol of the study. Field studies are well underway.

Provision is made for services of staff of the central office (epidemiologist, statistician, and secretary); for the services of medical referees, consultant services; for contractual services; and for provisions for the field work in the ten cities.

AMRO-268, Pediatric Education Course (See page 294)

The Organization is cooperating with the Government and the University of Chile in the development of a course in social and clinical pediatrics. Fellowships have been provided. Provision is made in 1962 for teaching supplies and equipment.

AMRO-272, Group Study of Medical School Organization  
(See page 294)

One of the major problems of the medical schools in certain countries of the Americas is the lack of a proper organization and proper administrative method in their functioning. To assist in solving these problems, a group

of directors or deans of medical schools will visit well-organized medical schools in Latin America which are in varying stages of development. Organized group discussion of methods and techniques observed and their possible uses in each of the participants' schools will be the seminar technique used on the study tour.

Provision is made for short-term consultants, participants, contractual services, and supplies and equipment.

AMRO-273, Seminar on Mental Health (See page 294)

Mental health programs cannot be put into practice unless accurate information about the existing problems and resources is available; what is especially needed, in addition, is a uniform approach to the theory and practice of mental hygiene in the different countries. With a view to bringing into uniformity the views concerning the incorporation of mental health activities into public health, it is proposed to hold two seminars, one in 1962 in Mexico and the second in 1963 in Argentina.

Provision is made for participants, short-term consultants, conference costs and publications in 1963 and 1964.

AMRO-274, Salt Fluoridation (See page 294)

Water fluoridation is the best method at present available for mass approach to caries prevention. However, it has very definite limitation in countries where a great segment of the population does not use water from a public supply system. There is, therefore, an urgent need to study alternative methods of fluoride supplementation in the diet for use where water fluoridation is not feasible.

Salt fluoridation holds promise of being the cheapest method for wide-scale supplementation of fluorine in the diet. It is being used extensively in Switzerland on a non-compulsory basis, but no controlled studies have been made as yet to demonstrate its effectiveness. This project will assist in a study on salt fluoridation.

Provision is made for supplies and equipment in 1962. Research funds are being requested from other sources to carry out detailed studies.

AMRO-275, Chagas' Disease (See page 294)

In response to the growing interest of the countries of the American continent in gaining a better knowledge of the extent and characteristics of Chagas' disease, suitable methods for its control, and its economic implications, the Organization called a meeting of a group of experts in March 1960, in Washington, D.C., so that they could exchange opinions and information on various aspects of Chagas' disease, especially those of public health importance. The study group made a series of recommendations, including one on diagnostic procedures to the effect that investigations, with the aim of preparing more uniform and stable antigens for use in the complement fixation test and the standardization of techniques for that test, should be continued.

Provision is made in this project in 1962 for a grant to one or more laboratories for the purposes of making these investigations, ensuring the distribution of more uniform antigens to the countries that request them, and securing the use of a standard technique.

AMRO-276, Sewage Treatment and Disposal (See page 294)

Because of the introduction of oxidation ponds and so-called package units for sewage treatment utilizing superoxidation mechanisms, there is great need from the economic standpoint to acquaint all engineers of the Latin American areas with the fundamentals of design and utilization of these new procedures.

It is therefore proposed to convene during 1962 a training course which would present the current information available on these and other newly-developed processes which would be applicable to the Latin American region. Participants from various agencies of Government and ministries of health would be invited to attend. Not only would the engineering principles of design and operation be covered but the public health implications would also be brought out in this training course.

Provision is made for participants and conference costs in 1962.

AMRO-277, Manual on School Sanitation (See page 296)

Because of the fundamental importance of not only the proper facilities in schools as an adjunct to training but also the protection of the health of school children, Governments in Latin America are placing greater emphasis on the provision of proper sanitary facilities in the schools. Furthermore, construction of new school facilities in all the countries are expected to increase greatly under the Alliance for Progress. At the present time, there is no single source of general information relating to water, sewage and excreta disposal, plumbing, lighting, ventilation, drinking-water and hand-washing facilities specifically designed for school installations.

In order to provide assistance to Governments in the future approach to those problems, it is proposed to provide consultant services to the Governments and to prepare a manual which would not only cover the design and installation of such facilities but will also refer to mechanisms of health, education and training regarding the use and the public health significance of the installations.

In 1962, work will begin on the preparation of the manual; in 1963, it is proposed to complete the manual and arrange for its publication; and in 1964 consultants are to introduce the manual and assist Governments in specific problems relating to school sanitation.

Provision is made for short-term consultants and publication costs.

AMRO-279, Study Group on Water Quality Standards (See page 296)

Tentative water quality standards established by WHO serve as a guide for Governments in the development of national standards. Because of the interest in these standards and the expanding water supply programs, provision is made in 1962 for short-term consultants to assess the WHO standards and to consider whether further revision and trial should be made.

AMRO-281, Planning (See page 296)

Recent events in the Americas have led to the recognition of health as a basic component of economic and social development. The role of health planning was acknowledged in the Charter of Punta del Este and one of the specific responsibilities assigned to the Bureau by the Charter was its furtherance. Thus, by the end of 1961, an Office of Planning had been established within the Bureau to coordinate and promote the development of national and regional health planning and to cooperate with other agencies participating in the developmental processes under the Charter.

During 1962 several groups of experts have been convened to review specialized health fields and to make recommendations for actions to be taken and goals to be achieved in relation to the Charter of Punta del Este. More specifically, groups have made reports in the fields of environmental sanitation, medical care, education and training, communicable diseases, maternal and child health, nutrition, health planning and administration, research, and malaria. In addition, preparation of a manual containing orientation to planning methodology and practices is underway. It will serve as a guide for development and integration of national health plans within national plans for economic and social development. It is being developed by the Center of Studies for Development with the cooperation of the School of Public Health, both in Venezuela.

Starting in 1962 and continuing in 1963 and 1964, the Organization is cooperating with the Latin American Institute for Economic and Social Planning, created under the aegis of the Economic Commission for Latin America, in the presentation of a three-month course in planning for high level national health personnel. It is planned, starting in 1963, to establish a similar course to be given in English in cooperation with a North American university. For these courses the Organization will provide consultant teachers and fellowships.

Advisory services are provided to Governments in organizing planning units and procedures and in developing national plans.

Provision has been made in 1962 by the Pan American Union for meetings of the expert groups and contractual services in the development of planning guides. Allocations are shown to the extent actually committed as of preparation of this document. The Organization, in addition to its central Office of Planning and zone advisors, provides through this project short-term consultant services and fellowships for the training courses and for advisory services.

AMRO-283, Coordination of International Research (See page 296)

In recognition of the increasing importance of research as an essential component of a comprehensive health program, the Organization has embarked upon an expanded program for the planning and coordination of research in Latin America. The program is being related to the special needs, environmental factors, and opportunities for research in the Americas.

Experts are being assigned to investigate specific fields of interest, to identify problems, to define research needs and resources, and to set forth goals to be developed through research. Research problems, needs and resources will be coordinated by PAHO to the mutual benefit of countries having common research interests.



A PAHO Advisory Committee on Medical Research, consisting of twelve eminent research leaders in the Americas, has been established. The first annual meeting will be in 1962.

Under a grant by the National Institutes of Health of the United States, provision is made for salaries and expenses including the cost of meetings of the Advisory Committee and consultants. In addition, the Organization has assigned one full-time medical officer to this project.

In all, provision is made for two medical officers, one medical research scientist, and two secretaries, as well as for short-term consultants.

AMRO-284, Dental Education (See page 296)

In Latin America 76 dental schools are engaged in training dentists to meet the needs of a rapidly increasing population. Standards of dental education varies considerably from one school to another and there is an acute need to raise the standard of teaching in all schools to a uniformly high level.

The purpose of this project is to improve dental education in the Region by providing fellowships for training of faculty members, travel grants for deans and dental educators, consultants for special studies on the over-all organization of dental schools, and assistance in the improvement of libraries.

Provision is made in 1963 and 1964 for the services of short-term consultants, fellowships, and a limited amount of teaching equipment and supplies.

AMRO-306, Conference on Postgraduate Training in Health Education (See page 298)

The expansion of health programs and services in the Americas requires increased numbers of trained personnel. The effectiveness of these programs and services will be influenced by the quality of health education activities supporting them.

It is proposed to convene conferences of teaching staff from schools of public health who are concerned with training in health education and national directors of health education. The purpose of these conferences will be to exchange technical information on the needs, objectives, scope, methodology and developments, and to recommend policies and methods for future development in the field of health education. Ways and means of selecting and preparing faculty members and health education staff for postgraduate training activities will also be discussed.

The first conference is scheduled for July 1962 and the second planned for 1964.

Provision is made in 1962 and 1964 for short-term consultants, conference costs, supplies and equipment, and participants.

AMRO-309, Program Evaluation (See page 298)

In accordance with decisions reached at a meeting of the Ministers of Health of the Central American countries and Panama, the individual Governments have requested assistance in the evaluation of national health services and programs. Provision is made in 1962 for a consultant to work with the Governments.

AMRO-310, Study on Production of Biologicals (See page 298)

A study on the present status of the needs, manufacture, and use of biological products in the countries of Middle and South America, as well as their potential capacity to increase their production, will be made in 1962 by a consultant, under a grant from the Inter-American Development Bank.

AMRO-323, Regional Conference on Environmental Sanitation (See page 298)

The Ministries of Health of most countries in Latin America are today confronted with a major problem in meeting their responsibilities in the fields of environmental sanitation. They have a position of leadership to other ministries in the fields of water supply, sewage disposal and housing, through their direct responsibilities for supervision and control of those works which directly bear upon public health. Thus, Ministries of Health must have well organized divisions of environmental sanitation as well as trained staff.

All Ministries of Health have had a number of years of experience in the development of environmental sanitation programs but little opportunity has existed to permit full discussion and interchange of views between the responsible engineers heading such programs. A regional conference is therefore scheduled for 1964.

The objectives of the meeting will be to review those activities and to suggest ways by which Ministries of Health can be most effective in implementing the national long-range plan as it relates to environmental sanitation programs. Such a meeting will greatly facilitate the development of programs which will have the maximum opportunity of receiving funds and the maximum opportunity for successful completion within the period of the national plan.

Provision is made in 1964 for participants from the various countries, for consultant services, and for conference costs.

AMRO-327, Courses in Management of Water Works (See page 298)

The success of the water projects in every country will in large measure be determined by the quality of administration and management which will prevail. To provide assistance in finding solutions to the problems in these fields, special courses on water works administration and management are scheduled.

Provision is made for fellowships, short-term consultants, and supplies in 1963 and 1964.

## PART III

SECTION 3 - Editorial Services and Publications  
(See page 300)

No increase is requested in the number of posts in this activity for 1964 over 1963. In 1964 an increase of

\$5,000 is budgeted to cover the cost of a Nutrition Supplement to the PASB Bulletin.

## PART IV

PAN AMERICAN HEALTH ORGANIZATION -  
SPECIAL FUND FOR HEALTH PROMOTION  
(See page 300)

The Executive Committee at its 43rd Meeting approved Resolution II recommending to the Directing Council the creation of a Special Fund for Health Promotion to which at least \$187,500 per year shall be appropriated until an amount of \$3,750,000 has been committed for expanded program activities. Accordingly, the Director has included provision for this Fund under Part IV of the proposed program and budget starting in 1962.

The Special Fund for Health Promotion is based on an agreement with the W. K. Kellogg Foundation, under which the Foundation agrees to lend to the Pan American Health Organization the sum of \$3,750,000, to be used toward erecting a headquarters building for the Pan American Health Organization and Regional Office for the Americas of the World Health Organization. This loan is repayable in annual installments of \$187,500 beginning in 1962 and to be repaid in full on or before 1 January 1982, without interest. Instead of going to the Kellogg Foundation, however, these annual payments shall be allocated to a Special Fund for

Health Promotion to finance expanded program activities. In view of the nature of this allocation, it is understood that the remaining items of the budget will cover and not reduce regular program activities.

The Organization is required to use the Fund to expand activities relating to (1) community water supplies; (2) nutrition; and (3) educational and training activities, including fellowships, although the Organization may from time to time revise these expanded activities upon approval by the Directing Council or the Conference, and give notice thereof to the Foundation.

In order to avoid a cumbersome and divided presentation of the field program, the projects and parts of projects to be financed under this part are included with all the other field projects presented in Part III under the respective country and intercountry headings, where they are identified by footnotes. All projects under Part IV also are listed in Annex 4, with corresponding cost estimates.

## PART V

PAN AMERICAN HEALTH ORGANIZATION -  
AMOUNT FOR INCREASING THE WORKING CAPITAL FUND  
(See page 300)

The condition of the Working Capital Fund was considered fully by the XI Directing Council, including recommendations by the External Auditor (Official Document No. 29) and by the Executive Committee at its 37th Meeting. The Directing Council, in Resolution VII decided "to approve the assignment of a portion of the budget for gradually increasing the Working Capital Fund until the authorized level has been reached, and for maintaining

the Fund at that level."

Pursuant to the above mentioned resolution the figure of \$300,000, which appeared in Official Document No. 31 and Document CE43/2, is proposed herein for 1963. Since the addition of this amount still will leave the Working Capital Fund far below its authorized level, a similar amount of \$300,000 is proposed for 1964.

**DETAILED SCHEDULES**

PAN AMERICAN HEALTH ORGANIZATION												SUMMARY - ALL PARTS
REGULAR BUDGET						OTHER FUNDS						
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	
			\$	\$	\$				\$	\$	\$	
17	17	17	369,251	229,850	276,005							PART I PAN AMERICAN HEALTH ORGANIZATION - ORGANIZATIONAL MEETINGS
138	142	145	1,636,834	1,713,198	1,815,193	6	4	2	36,030	21,742	12,000	PART II PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS
201	202	204	3,028,824	3,559,452	3,981,302	479	491	488	5,299,204	5,811,431	6,293,158	PART III PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS
			187,500	187,500	187,500							PART IV PAN AMERICAN HEALTH ORGANIZATION - SPECIAL FUND FOR HEALTH PROMOTION
			17,591	300,000	300,000							PART V PAN AMERICAN HEALTH ORGANIZATION - AMOUNT FOR INCREASING THE WORKING CAPITAL FUND
356	361	366	5,240,000	5,990,000	6,560,000	485	495	490	5,335,234	5,833,173	6,305,158	TOTAL - ALL PARTS
			100,000	100,000	100,000							LESS MISCELLANEOUS INCOME
			5,140,000	5,890,000	6,460,000							TOTAL FOR ASSESSMENT
17	17	17	156,721	149,289	161,202							PART I PAN AMERICAN HEALTH ORGANIZATION - ORGANIZATIONAL MEETINGS
			194,030	62,061	96,303							Ch. 1. <u>Conference and Translation Section</u>
			17,500	17,500	17,500							Ch. 2. Meetings of the Pan American Sanitary Conference, Directing Council, Executive Committee and WHO Regional Committee
			1,000	1,000	1,000							Ch. 3. <u>Meetings of the Executive Committee</u>
												Ch. 4. <u>Temporary Personnel</u>
17	17	17	369,251	229,850	276,005							TOTAL - PART I
7	7	7	104,736	104,680	104,492							PART II PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS
2	2	2	27,000	28,142	24,092							Sect. 1. <u>Executive Offices</u>
4	4	4	50,337	52,166	52,997							Ch. 1. Office of the Director
3	3	3	35,724	32,585	34,302							Ch. 2. Office of Planning
												Ch. 3. Office of Public Information
												Ch. 4. Office of Evaluation and Reports
16	16	16	217,797	217,573	215,883							

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
5	5	5	97,997	67,131	89,137							22	22	22	467,248	296,981	365,142
74	75	77	917,965	954,969	1,018,373							218	221	224	2,590,829	2,689,909	2,845,566
61	65	66	1,394,398	1,574,275	1,767,943	82	91	88	1,414,348	1,720,004	1,628,924	823	849	846	11,136,774	12,665,162	13,671,327
															187,500	187,500	187,500
															17,591	300,000	300,000
140	145	148	2,410,360	2,596,375	2,875,453	82	91	88	1,414,348	1,720,004	1,628,924	1,063	1,092	1,092	14,399,942	16,139,552	17,369,535
5	5	5	55,397	54,326	58,009							22	22	22	212,118	203,615	219,211
			42,600	17,805	31,128										236,630	74,866	127,431
															17,500	17,500	17,500
															1,000	1,000	1,000
5	5	5	97,997	67,131	89,137							22	22	22	467,248	296,981	365,142
			32,996	32,996	32,996							7	7	7	137,732	137,676	137,488
												2	2	2	27,000	28,142	24,092
3	3	3	54,182	54,956	55,167							7	7	7	104,519	107,122	108,164
1	2	2	5,087	22,986	21,063							4	5	5	40,811	55,571	55,365
4	5	5	92,265	110,938	109,226							20	21	21	310,062	328,511	325,109

PAN AMERICAN HEALTH ORGANIZATION												SUMMARY - ALL PARTS
REGULAR BUDGET						OTHER FUNDS						
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	
			\$	\$	\$				\$	\$	\$	
9	9	9	103,628	104,669	111,618							Sect. 2. <u>Technical Services</u>
4	5	5	46,470	61,004	62,150	1	1	1	4,496	7,515	7,692	Ch. 1. Communicable Diseases Branch
7	9	9	51,752	69,875	71,914	2			17,877			Ch. 2. Environmental Sanitation Branch
13	14	14	186,310	187,780	197,998							Ch. 3. Fellowships Branch
13	13	13	134,176	136,821	141,100							Ch. 4. Health Promotion Branch
3	3	3	69,583	73,531	67,703	1	1	1	3,973	4,141	4,308	Ch. 5. Health Statistics Branch
21	21	21	200,906	199,360	206,459							Ch. 6. Malaria Eradication Branch
												Ch. 7. Professional Education Branch
70	74	74	792,825	833,040	858,942	4	2	2	26,346	11,656	12,000	
												Sect. 3. <u>Administration</u>
2	2	2	43,983	41,494	40,378							Ch. 1. Office of the Chief
20	20	21	179,266	184,810	192,487							Ch. 2. Budget and Finance Branch
30	30	32	243,203	250,776	260,578	2	2		9,684	10,086		Ch. 3. Management and Personnel Branch
52	52	55	466,452	477,080	493,443	2	2		9,684	10,086		
			13,150	13,000	14,300							Sect. 4. <u>Temporary Personnel</u>
												Sect. 5. <u>Common Services - Headquarters</u>
			60,623	73,220	119,210							Ch. 1. Rental and Maintenance of Premises
			1,771	1,770	1,770							Ch. 2. Rental and Maintenance of Equipment
			36,580	36,875	39,825							Ch. 3. Communications
			6,490	10,620	10,620							Ch. 4. Other Contractual Services
			3,128	5,310	5,310							Ch. 5. Freight and Other Transportation
			27,140	28,320	29,500							Ch. 6. Supplies
			3,476	6,215	6,215							Ch. 7. Insurance - Non-Staff
			177	175	175							Ch. 8. Indemnities, Awards and Special Claims
			7,225	10,000	20,000							Ch. 9. Office Equipment
			146,610	172,505	232,625							
138	142	145	1,636,834	1,713,198	1,815,193	6	4	2	36,030	21,742	12,000	TOTAL - PART II

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
3	3	3	43,061	50,465	42,059							12	12	12	146,689	155,134	153,677
2	2	2	31,241	30,115	30,520							7	8	8	82,207	98,634	100,362
10	10	10	98,734	94,626	96,752							19	19	19	168,363	164,501	168,666
6	6	6	87,583	79,355	80,460							19	20	20	273,893	267,135	278,458
4	4	4	39,981	42,650	44,478							17	17	17	174,157	179,471	185,578
9	9	9	91,262	86,060	93,503							13	13	13	164,818	163,732	165,514
2	2	2	31,567	31,340	29,372							23	23	23	232,473	230,700	235,831
36	36	36	423,429	414,611	417,144							110	112	112	1,242,600	1,259,307	1,288,086
15	15	15	7,129 125,206	6,470 131,573	6,470 133,982							2 35	2 35	2 36	51,112 304,472	47,964 316,383	46,848 326,469
19	19	21	159,546	162,282	176,926							51	51	53	412,433	423,144	437,504
34	34	36	291,881	300,325	317,378							88	88	91	768,017	787,491	810,821
			7,000	7,000	7,700										20,150	20,000	22,000
			42,127	50,880	82,840										102,750	124,100	202,050
			1,229	1,230	1,230										3,000	3,000	3,000
			25,420	25,625	27,675										62,000	62,500	67,500
			4,510	7,380	7,380										11,000	18,000	18,000
			2,172	3,690	3,690										5,300	9,000	9,000
			18,860	19,680	20,500										46,000	48,000	50,000
			1,724	3,485	3,485										5,200	9,700	9,700
			123	125	125										300	300	300
			7,225	10,000	20,000										14,450	20,000	40,000
			103,390	122,095	166,925										250,000	294,600	399,550
74	75	77	917,965	954,969	1,018,373							218	221	224	2,580,829	2,689,909	2,845,566

PAN AMERICAN HEALTH ORGANIZATION												SUMMARY - ALL PARTS	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
16	12	12	174,294	111,529	117,170	1	1	1	59,517	60,073	60,365	PART III PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS  Sect. 1. <u>Zone Offices</u>  Ch. 1. Zone I, Caracas Ch. 2. Zone II, Mexico, D. F. Ch. 3. Zone III, Guatemala City Ch. 4. Zone IV, Lima Ch. 5. Zone V, Rio de Janeiro Ch. 6. Zone VI, Buenos Aires	
16	12	12	135,542	110,935	111,274	2	2	2	6,564	6,801	7,045		
20	16	16	168,724	144,188	146,896	2	1	1	6,537	3,663	3,819		
17	14	14	131,854	109,271	118,309	1			2,227				
13	9	9	115,268	72,215	74,452								
18	15	15	164,984	136,100	139,804								
100	78	78	890,666	684,238	707,905	6	4	4	74,945	70,537	71,229		
1	1	1	9,783	25,199	17,469	161	149	145	3,043,817	3,249,137	3,602,372		Sect. 2. <u>Programs</u>  Ch. 1. Malaria Ch. 2. Tuberculosis Ch. 3. Venereal Diseases and Treponematoses Ch. 4. Bacterial Diseases Ch. 5. Parasitic Diseases Ch. 6. Virus Diseases Ch. 7. Leprosy Ch. 8. Public Health Administration Ch. 9. Vital and Health Statistics Ch. 10. Dental Health Ch. 11. Nursing Ch. 12. Social and Occupational Health Ch. 13. Chronic and Degenerative Diseases Ch. 14. Health Education Ch. 15. Maternal and Child Health Ch. 16. Mental Health Ch. 17. Nutrition Ch. 18. Radiation and Isotopes Ch. 19. Environmental Health Ch. 20. Education and Training Ch. 21. Other Projects Foot-and-Mouth Disease Center
3	3	3	60,111	65,669	69,294								
			17,936	500	3,700								
1	1	1	62,783	59,929	92,671	2	2	2	19,900	32,196	18,062		
1	1	1	30,791	53,793	11,120								
42	38	39	925,494	1,040,351	1,192,018				55,702				
4	4	4	70,059	109,877	123,166	3	3	3	226,100	231,358	102,562		
			44,139	31,200	51,300	1	1	1	28,020	8,900	12,400		
4	18	20	98,490	253,216	311,786								
2	2	2	27,862	46,075	53,373								
			18,500	7,800	7,800								
3	3	3	48,548	55,905	63,117				49,190	50,228	50,092		
			29,871	36,738	13,400								
7	9	9	118,304	177,521	252,382	133	140	140	665,700	819,755	828,231		
			5,600	46,350	48,990								
16	25	24	330,600	524,733	569,887	12	20	20	371,508	514,684	610,550		
4	5	4	98,669	167,507	172,754								
2	3	5	119,925	145,291	166,044	46	46	43	216,514	154,636	135,330		
						115	126	130	537,808	670,000	852,330		
			2,117,465	2,854,054	3,244,331				5,214,259	5,730,894	6,211,929	Subtotal	
			(187,500)	(187,500)	(187,500)							Less: <u>Sum of projects budgeted</u> <u>in Part IV</u>	
90	113	115	1,929,965	2,666,554	3,056,831	473	487	484	5,214,259	5,730,894	6,211,929		
11	11	11	208,193	208,660	216,566				10,000	10,000	10,000	Sect. 3. <u>Editorial Services and</u> <u>Publications</u>	
201	202	204	3,028,824	3,559,452	3,981,302	479	491	488	5,299,204	5,811,431	6,293,158	TOTAL - PART III	
			187,500	187,500	187,500							PART IV PAN AMERICAN HEALTH ORGANIZATION Special Fund for Health Promotion	
			17,591	300,000	300,000							PART V PAN AMERICAN HEALTH ORGANIZATION Amount for Increasing the Working Capital Fund	



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET      TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
2	1	1	2,345	2,315	2,315							17	13	13	236,156	173,917	179,850
1			39,996	21,821	24,539							20	15	15	182,102	139,557	142,858
			23,200	2,103	2,103							23	17	17	198,561	149,954	152,818
			4,627	2,068	2,123							18	14	14	138,708	111,339	120,432
1	1	1	17,013	19,425	21,597							14	10	10	132,281	91,640	96,049
			5,440	2,956	2,956							18	15	15	170,424	139,056	142,760
4	2	2	92,621	50,688	55,633							110	84	84	1,058,232	805,463	834,767
5	5	5	76,960	83,375	87,453	8	8	8	140,071	141,686	142,671	174	162	158	3,260,848	3,474,198	3,832,496
3	3	3	79,477	98,606	108,140	1	2	1	17,924	38,290	23,772	5	6	5	107,184	162,095	149,381
3	3	3	48,653	58,759	48,514							6	6	6	108,764	124,428	117,808
															17,936	6,400	24,060
			8,300	13,300	9,600	3	3	1	57,143	37,754	27,157	6	6	4	148,126	143,179	147,490
2	2	2	46,972	42,144	40,284	1	1	1	16,042	16,823	21,097	4	4	3	93,805	112,760	72,501
23	28	31	437,408	687,339	810,213	41	48	48	605,915	818,172	855,730	106	114	118	2,024,519	2,545,862	2,857,961
3	3	3	88,507	83,200	66,011				34,255	34,255	34,255	10	10	10	418,921	458,690	325,994
				11,609	11,609							1	1	1	72,159	51,709	75,309
9	9	8	205,460	217,636	214,625	11	10	10	133,698	140,794	144,819	24	37	38	437,648	611,646	671,230
						3	3	3	169,263	237,335	122,798	5	5	5	197,125	283,410	176,171
															18,500	7,800	7,800
2	2	2	56,175	36,113	56,140							2	2	2	56,175	36,113	56,140
			5,300	13,900	13,900							3	3	3	103,038	120,033	127,109
			3,400												33,271	36,738	13,400
3	2	2	47,186	37,630	39,629					4,600	4,600	143	151	151	831,190	1,039,506	1,124,842
			29,900												35,500	46,350	48,990
2	3	2	110,511	73,235	111,051	11	13	13	196,467	204,325	205,669	41	61	59	1,009,086	1,316,977	1,497,157
1	1		36,800	45,230	73,231	3	3	3	43,570	45,970	46,356	4	6	5	135,469	212,737	245,985
												51	52	51	380,009	345,897	347,730
												115	126	130	537,808	670,000	852,330
			1,281,009	1,502,076	1,690,400				1,414,348	1,720,004	1,628,924				10,027,081	11,807,028	12,775,584
															(187,500)	(187,500)	(187,500)
55	61	62	1,281,009	1,502,076	1,690,400	82	91	88	1,414,348	1,720,004	1,628,924	700	752	749	9,839,581	11,619,528	12,588,084
2	2	2	20,768	21,511	21,910							13	13	13	238,961	240,171	248,476
61	65	66	1,394,398	1,574,275	1,767,943	82	91	88	1,414,348	1,720,004	1,628,924	823	849	846	11,136,774	12,665,162	13,671,327
															187,500	187,500	187,500
															17,591	300,000	300,000

PAN AMERICAN HEALTH ORGANIZATION											PART I		GRADE
REGULAR BUDGET						OTHER FUNDS					ORGANIZATIONAL MEETINGS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	Ch. 1. Conference and Translation Section (For text see page 37)	
1	1	1		9,978	10,239							Section Chief, .0021	P4
												<u>Meeting Services</u>	
1	1	1		8,843	9,076							Administrative Services Officer, .13	P3
1	1	1		6,310	6,310							Document Officer, .14	P1
1	1	1		5,566	5,771							Administrative Services Assistant, .54	WL8
2	2	2		8,957	9,327							Clerk, .17, .18	WL7
2	2	2		8,138	8,438							Clerk Stenographer, .28, .55	WL5
												<u>Language Services</u>	
												<u>Spanish</u>	
1	1	1		8,598	8,808							Translator Reviser, .20, 4.24, 4.8000	P3
1	1	1		7,618	7,828							Translator, .22	P3
2	2	2		14,305	14,695							Translator, .288, .0006	P2
												<u>English</u>	
1	1	1		8,510	8,720							Translator Reviser, .23	P3
1	1	1		6,272	6,452							Translator, .21, 4.26	P2
												<u>Portuguese</u>	
												Translator, 4.25	P3
												<u>Stenographic Services</u>	
1	1	1		4,175	4,335							Clerk, 4.27	WL7
2	2	2		7,913	8,213							Secretary, .0003	WL6
												Clerk Stenographer, .0002, .0004	WL5
				105,183	108,212							Cost of salaries	
				44,106	52,990							Common Staff Costs	
				149,289	161,202							Cost of Staff	
17	17	17	156,721	149,289	161,202							TOTAL	
												Ch. 2. Meetings of the Pan American Sanitary Conference, Directing Council, Executive Committee and WHO Regional Committee (For text see page 37)	
				9,609	16,136							Personal Services	
				4,802	27,985							Travel and Transportation	
				133	259							Space and Equipment	
				6,800	11,411							Other Services	
				1,667	1,983							Administrative Supplies	
				39,050	38,529							Publications	
			194,030	62,061	96,303							TOTAL	
												Ch. 3. Meetings of the Executive Committee (For text see page 37)	
				5,800	5,800							Personal Services	
				6,900	6,900							Travel and Transportation	
				100	100							Space and Equipment Services	
				1,300	1,300							Other Services	
				3,400	3,400							Supplies and Materials	
			17,500	17,500	17,500							TOTAL	
			1,000	1,000	1,000							Ch. 4. Temporary Personnel (For text see page 37)	

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		9,978	10,239
												1	1	1	8,843		9,076
												1	1	1	6,310		6,310
												1	1	1	5,566		5,771
												2	2	2	8,957		9,327
												2	2	2	8,138		8,438
2	2	2		17,108	17,528							3	3	3		25,706	26,336
												1	1	1	7,618		7,828
												2	2	2	14,305		14,695
1	1	1		7,880	7,880							1	1	1	8,510		8,720
												2	2	2	14,152		14,332
1	1	1		8,213	8,423							1	1	1	8,213		8,423
1	1	1		4,440	4,625							1	1	1	4,440		4,625
												1	1	1	4,175		4,335
												2	2	2	7,913		8,213
				37,641	38,456											142,824	146,668
				16,685	19,553											60,791	72,543
				54,326	58,009											203,615	219,211
5	5	5	55,397	54,326	58,009							22	22	22	212,118	203,615	219,211
				4,805	8,068											14,414	24,204
				3,700	16,233											8,502	44,218
				67	129											200	388
				3,400	5,706											10,200	17,117
				833	992											2,500	2,975
																39,050	38,529
			42,600	12,805	31,128										236,630	74,866	127,431
																5,800	5,800
																6,900	6,900
																100	100
																1,300	1,300
																3,400	3,400
															17,500	17,500	17,500
															1,000	1,000	1,000

PAN AMERICAN HEALTH ORGANIZATION												PART II HEADQUARTERS	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
												SECTION I	
												EXECUTIVE OFFICES (For text see page 38)	
												Ch. 1. <u>Office of the Director</u>	
1	1	1		18,900	18,900							Director, .1	
1	1	1		17,900	17,900							Deputy Director, .2	
1	1	1		16,900	16,900							Assistant Director, .3	
1	1	1		6,310	6,310							Administrative Officer, .6	
2	2	2		12,055	12,055							Secretary, .7, .8	
1	1	1		4,455	4,640							Secretary, .0045	
				(17,900)	(17,900)							Contribution of WHO	
				58,620	58,805							Cost of salaries	
				30,860	30,487							Common Staff Costs	
				89,480	89,292							<u>Cost of Staff</u>	
				9,000	9,000							Duty Travel for Executive Offices	
				6,000	6,000							Representation Allowance of the Director	
				200	200							Hospitality	
7	7	7	104,736	104,680	104,492							TOTAL	
												Ch. 2. <u>Office of Planning</u>	
1	1	1		12,119	12,403							Medical Officer, .0054	
1	1	1		4,900	5,105							Technical Assistant, .0059	
				17,019	17,508							Cost of salaries	
				11,123	6,584							Common Staff Costs	
2	2	2	27,000	28,142	24,092							TOTAL	
												Ch. 3. <u>Office of Public Information</u>	
1	1	1		6,658	6,848							Information Officer, 4.29	
												Information Officer, .0009	
1	1	1		5,211	5,365							Information Officer, 4.30	
1	1	1		4,468	4,628							Information Assistant, .32	
1	1	1		3,382	3,513							Secretary, .31, 4.1301	
												Clerk Typist, .0020	
				19,719	20,354							Cost of salaries	
				7,782	7,978							Common Staff Costs	
				27,501	28,332							<u>Cost of Staff</u>	
				10,500	10,500							News Releases	
												World Health Day	

## WORLD HEALTH ORGANIZATION

## T O T A L S

REGULAR BUDGET									TECHNICAL ASSISTANCE FUNDS						T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$				\$	\$	\$			
												1	1	1		18,900	18,900			
												1	1	1		17,900	17,900			
												1	1	1		16,900	16,900			
												1	1	1		6,310	6,310			
												2	2	2		12,055	12,055			
												1	1	1		4,455	4,640			
				17,900	17,900															
				17,900	17,900											76,520	76,705			
				1,996	1,996											32,856	32,483			
				19,896	19,896											109,376	109,188			
				9,000	9,000											18,000	18,000			
				2,600	2,600											8,600	8,600			
				1,500	1,500											1,700	1,700			
			32,996	32,996	32,996							7	7	7	137,732	137,676	137,488			
												1	1	1		12,119	12,403			
												1	1	1		4,900	5,105			
																17,019	17,508			
																11,123	6,584			
												2	2	2	27,000	28,142	24,092			
1	1	1		9,870	9,870							1	1	1		9,870	9,870			
1	1	1		6,310	6,310							1	1	1		6,658	6,848			
1	1	1		4,082	4,242							1	1	1		6,310	6,310			
												1	1	1		5,211	5,365			
												2	2	2		8,550	8,870			
												1	1	1		3,382	3,513			
				20,262	20,422											39,981	40,776			
				10,003	10,054											17,785	18,032			
				30,265	30,476											57,766	58,808			
				5,500	5,500											16,000	16,000			
				10,000	10,000											10,000	10,000			

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS	GRADE		
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
												Office of Public Information (continued)		
				3,500	3,500							Supplies, Materials and Other Services		
				1,600	1,600							Drafting Supplies		
				2,800	2,800							Photographic Services		
				665	665							Slides and Film Strips		
				5,600	5,600							Exhibits		
4	4	4	50,337	52,166	52,997							TOTAL		
												Ch. 4. Office of Evaluation and Reports		
1	1	1		9,640	9,870							Medical Officer, 4.0522		P5
1	1	1		6,310	6,500							Economic and Reports Officer, .293		P4
1	1	1		4,855	4,855							Reports Officer, .0060		P2
												Clerk, .11, 4.0509		WL6
				20,805	21,225							Cost of salaries		
				11,780	13,077							Common Staff Costs		
3	3	3	35,724	32,585	34,302							TOTAL		
												SECTION 2 TECHNICAL SERVICES (For text see page 38)		
												Ch. 1. Communicable Diseases Branch		
1	1	1		14,530	14,530							Chief of Branch, .86		P6
1	1	1		11,018	11,274							Medical Officer (Tuberculosis), .0025		P4
1	1	1		9,117	9,360							Medical Officer (Parasitologist), .0048		P4
1	1	1		11,420	11,420							Medical Officer (Communicable Diseases), 4.89, 4.239		P4
1	1	1		4,903	5,087							Public Health Veterinarian, .88		P4
1	1	1		4,455	4,615							Administrative Assistant, .0026		WL7
												Secretary, .91		WL6
3	3	3		11,726	12,176							Clerk Stenographer, .74, .93, .95, 4.84		WL5
				67,169	68,462							Cost of salaries		
				26,132	31,788							Common Staff Costs		
				93,301	100,250							Cost of Staff		
				11,368	11,368							Duty Travel		
9	9	9	103,628	104,669	111,618							TOTAL		

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				3,706	3,706											7,206	7,206
				750	750											2,350	2,350
				1,200	1,200											4,000	4,000
				335	335											1,000	1,000
				3,200	3,200											8,800	8,800
3	3	3	54,182	54,956	55,167							7	7	7	104,519	107,122	108,164
1	1	1		10,650	10,910							1	1	1		10,650	10,910
				4,735	4,895							1	1	1		9,640	9,870
				15,385	15,805							1	1	1		6,310	6,500
				7,601	5,258							2	2	2		9,590	9,750
																36,190	37,030
																19,381	18,335
1	2	2	5,087	22,986	21,063							4	5	5	40,811	55,571	55,365
2	2	2		21,473	21,962												
												1	1	1		14,530	14,530
												1	1	1		11,018	11,274
												1	1	1		9,117	9,360
												2	2	2		21,473	21,962
												1	1	1		11,420	11,420
												1	1	1		4,903	5,087
												1	1	1		4,455	4,615
1	1	1		4,038	4,188							4	4	4		15,764	16,364
				25,511	26,150											92,680	94,612
				19,270	10,225											45,402	42,013
				44,781	36,375											138,082	136,625
				5,684	5,684											17,052	17,052
3	3	3	43,061	50,465	42,059							12	12	12	146,689	155,134	153,677





## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		12,095	12,380							1	1	1		12,095	12,380
1	1	1		5,015	5,015							2	2	2		20,780	21,005
												1	1	1		6,697	9,117
												1	1	1		5,015	5,015
												3	3	3		12,113	12,563
				17,110	17,395											56,700	60,080
				10,163	10,283											30,566	28,914
				27,273	27,678											87,266	88,994
				2,842	2,842											11,368	11,368
2	2	2	31,241	30,115	30,520							7	8	8	82,207	98,634	100,362
1	1	1		11,274	11,520							1	1	1		11,274	11,520
2	2	2		16,968	17,388							1	1	1		9,076	9,320
1	1	1		7,390	7,600							3	3	3		22,563	25,002
1	1	1		5,925	5,925							1	1	1		7,390	7,600
2	2	2		8,973	9,343							1	1	1		5,925	5,925
1	1	1		5,365	5,365							5	5	5		21,414	23,357
				4,388	4,548							1	1	1		5,365	5,365
1	1	1		3,925	4,075							1	1	1		5,550	5,550
												1	1	1		4,388	4,548
												3	3	3		12,951	13,431
												1	1	1		3,925	4,075
				64,208	65,764											109,821	115,693
				24,867	25,437											45,427	43,720
				89,075	91,201											155,248	159,413
				5,551	5,551											9,253	9,253
10	10	10	98,734	94,626	96,752							19	19	19	168,363	164,501	168,666
1	1	1		11,253	11,420							1	1	1		10,845	11,105
1	1	1		10,260	10,520							1	1	1		12,119	12,403
1	1	1		11,420	11,420							1	1	1		12,119	12,403
1	1	1		5,473	5,550							1	1	1		11,420	11,420
												1	1	1		9,548	9,774
												1	1	1		9,736	9,978
												1	1	1		10,802	11,062
												1	1	1		10,260	10,520
												1	1	1		11,420	11,420
												1	1	1		5,473	5,550
												1	1	1		4,068	4,228
2	2	2		7,688	7,988							5	6	6		21,683	23,440

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS		GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
Health Promotion Branch (continued)														
<u>Radiation Protection</u>														
1	1	1		13,100	13,100								Medical Officer (Radiation Protection), .299	P5
1	1	1		10,195	10,455								Scientist (Radiation Protection), .0041	P4
1	1	1		5,015	5,015								Secretary, .0046	WL6
				111,542	114,975								Cost of salaries	
				56,344	63,129								Common Staff Costs	
				167,886	178,104								<u>Cost of Staff</u>	
				19,894	19,894								Duty Travel	
13	14	14	186,310	187,780	197,998								TOTAL	
Ch. 5. <u>Health Statistics Branch</u>														
1	1	1		12,119	12,403								Statistician, .96	P5
1	1	1		9,360	9,585								Statistician, .0027, 4.0508	P4
2	2	2		16,426	16,849								Statistician, .97, .0029	P3
2	2	2		14,145	14,332								Statistician, .98, .102, 4.99	P2
2	2	2		12,620	12,620								Statistician, .100, .101	P1
1	1	1		6,310	6,310								Statistical Assistant, .0028	P1
1	1	1		4,934	5,139								Statistical Assistant, 4.103	WL8
1	1	1		4,015	4,175								Technical Assistant, .104	WL8
1	1	1		4,855	4,855								Clerk Stenographer, .289, 4.106	WL6
1	1	1		4,113	4,263								Varitypist, .105	WL6
				88,897	90,531								Clerk Typist, .0030	WL5
				42,240	44,885								Cost of salaries	
				131,137	135,416								Common Staff Costs	
				5,684	5,684								<u>Cost of Staff</u>	
													Duty Travel	
13	13	13	134,176	136,821	141,100								TOTAL	
Ch. 6. <u>Malaria Eradication Branch</u>														
1	1	1		14,530	14,530								Chief, Malaria Eradication, .1023	D1
1	1	1		12,192	12,473								Deputy Chief, .1074	P5
1	1	1		12,119	12,403								Senior Epidemiologist, .1073	P5
													Epidemiologist, 4.0510	P5
													Medical Consultant, 4.0511	Ung
													Operations Officer, 4.0512	P4
													Operations Analyst, 4.0513	P1
													Administrative Assistant, 4.0514	WL7
													Secretary, 4.0515, 4.0516	WL6
						1	1	1	3,725	3,875			Clerk Stenographer, 4.0517	WL5
													Clerk, 9383, 4.0518	WL5
				38,841	39,406				3,725	3,875			Cost of salaries	
				25,112	18,719				416	433			Common Staff Costs	
				63,953	58,125				4,141	4,308			<u>Cost of Staff</u>	
				9,578	9,578								Duty Travel	
3	3	3	69,583	73,531	67,703	1	1	1	3,973	4,141	4,308		TOTAL	

## WORLD HEALTH ORGANIZATION

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

## T O T A L S

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		13,100	13,100
												1	1	1		10,195	10,455
												1	1	1		5,015	5,015
				46,094	46,898											157,636	161,873
				24,735	25,036											81,079	88,165
				70,829	71,934											238,715	250,038
				8,526	8,526											28,420	28,420
6	6	6	87,583	79,355	80,460							19	20	20	273,893	267,135	278,458
1	1	1		9,180	9,420							1	1	1		12,119	12,403
												2	2	2		18,540	19,005
1	1	1		7,880	7,880							2	2	2		16,426	16,849
												3	3	3		22,025	22,212
												2	2	2		12,620	12,620
1	1	1		4,900	5,105							1	1	1		6,310	6,310
												1	1	1		4,900	5,105
1	1	1		5,015	5,015							1	1	1		4,934	5,139
												2	2	2		9,030	9,190
												1	1	1		4,855	4,855
												1	1	1		4,113	4,263
				26,975	27,420											115,872	117,951
				12,833	14,216											55,073	59,101
				39,808	41,636											170,945	177,052
				2,842	2,842											8,526	8,526
4	4	4	39,981	42,650	44,478							17	17	17	174,157	179,471	185,578
1	1	1		11,170	11,420							1	1	1		14,530	14,530
1	1	1		9,100	9,100							1	1	1		12,192	12,473
1	1	1		8,405	8,615							1	1	1		12,119	12,403
1	1	1		6,310	6,310							1	1	1		11,170	11,420
1	1	1		5,550	5,550							1	1	1		9,100	9,100
2	2	2		8,910	9,230							1	1	1		8,405	8,615
1	1	1		3,925	4,075							1	1	1		6,310	6,310
1	1	1		4,338	4,488							2	2	2		5,550	5,550
												1	1	1		8,910	9,230
												1	1	1		3,925	4,075
												2	2	2		8,063	8,363
				57,708	58,788											100,274	102,069
				18,775	25,138											44,303	44,290
				76,483	83,926											144,577	146,359
				9,577	9,577											19,155	19,155
9	9	9	91,262	86,060	93,503							13	13	13	164,818	163,732	165,514

PAN AMERICAN HEALTH ORGANIZATION												PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	Ch. 7. <u>Professional Education Branch</u>		
1	1	1		11,314	11,560							Chief of Branch, .67	P5	
1	1	1		11,420	11,420							Medical Officer, 4.235	P4	
1	1	1		4,594	4,779							Nurse Educator, .68	P4	
2	2	2		9,403	9,563							Clerk, .231	WL7	
1	1	1		5,015	5,015							Secretary, .71, .0022	WL6	
1	1	1		3,788	3,938							Clerk Stenographer, .52	WL6	
												Clerk Stenographer, .70	WL5	
												<u>Library</u>		
1	1	1		9,870	9,870							Chief Librarian, .37	P3	
1	1	1		5,365	5,365							Cataloguer, 4.38	P1	
2	2	2		9,870	9,870							Library Clerk, .39	WL7	
2	2	2		8,163	8,400							Clerk, .41, .42	WL6	
												Clerk, .40, .43	WL5	
												<u>Visual Aids</u>		
1	1	1		9,870	9,870							Visual Media Officer, .209	P3	
1	1	1		7,338	7,548							Visual Media Officer, .210	P2	
1	1	1		6,310	6,310							Photo Editor, .255	P1	
4	4	4		22,316	22,727							Visual Media Assistant, .211, .212, .213, .0001	WL8	
1	1	1		4,855	4,855							Clerk, .214	WL6	
				129,491	131,090							Cost of salaries		
				57,785	63,285							Common Staff Costs		
				187,276	194,375							Cost of Staff		
				5,684	5,684							Duty Travel		
				6,400	6,400							Library Acquisitions and Binding		
21	21	21	200,906	199,360	206,459							TOTAL		
												SECTION 3 ADMINISTRATION (For text see page 38)		
												Ch. 1. <u>Office of the Chief</u>		
1	1	1		13,950	14,140							Chief of Administration, .0056	D1	
1	1	1		5,365	5,365							Secretary, .114	WL7	
				19,315	19,505							Cost of salaries		
				10,929	11,073							Common Staff Costs		
				30,244	30,578							Cost of Staff		
				6,250	4,800							Duty Travel		
				5,000	5,000							Audit Costs		
2	2	2	43,983	41,494	40,378							TOTAL		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

## ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

## ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

## ESTIMATED EXPENDITURE

62 63 64			1962 1963 1964			62 63 64			1962 1963 1964			62 63 64			1962 1963 1964		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		9,851	10,108							1	1	1		11,314	11,560
												1	1	1		9,851	10,108
												1	1	1		11,420	11,420
												1	1	1		4,594	4,779
												2	2	2		9,403	9,563
												1	1	1		5,015	5,015
												1	1	1		3,788	3,938
1	1	1		6,310	6,310							1	1	1		9,870	9,870
												1	1	1		6,310	6,310
												1	1	1		5,365	5,365
												2	2	2		9,870	9,870
												2	2	2		8,163	8,400
												1	1	1		9,870	9,870
												1	1	1		7,338	7,548
												1	1	1		6,310	6,310
												4	4	4		22,316	22,727
												1	1	1		4,855	4,855
				16,161	16,418											145,652	147,508
				12,337	10,112											70,122	73,397
				28,498	26,530											215,774	220,905
				2,842	2,842											8,526	8,526
																6,400	6,400
2	2	2	31,567	31,340	29,372							23	23	23	232,473	230,700	235,831
												1	1	1		13,950	14,140
												1	1	1		5,365	5,365
																19,315	19,505
																10,929	11,073
																30,244	30,578
				6,470	6,470											12,720	11,270
																5,000	5,000
			7,129	6,470	6,470							2	2	2	51,112	47,964	46,848

PAN AMERICAN HEALTH ORGANIZATION											PART II		GRADE
REGULAR BUDGET						OTHER FUNDS					HEADQUARTERS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	Ch. 2. <u>Budget and Finance Branch</u>	
1	1	1		13,100	13,100							Chief of Branch, .152	P5
1	1	1		4,415	4,575							Secretary, .157	WL6
												<u>Budget Section</u>	
2	2	2		16,022	16,442							Budget Officer, .155, .0015, 4.153	P3
1	1	1		5,925	5,925							Administrative Officer, 4.35	P1
1	1	1		5,550	5,550							Budget Assistant, .298, 4.0506	WL8
												Budget Clerk, .9	WL7
												Clerk, 4.117	WL6
1	1	1		4,088	4,238							Clerk, 4.196	WL5
												Clerk Typist, .158	WL5
												<u>Finance Section</u>	
1	1	1		7,810	8,020							Finance Officer, 4.160	P4
1	1	1		8,458	8,667							Finance Officer, .0044	P3
3	3	3		22,261	22,799							Senior Accountant, .177	P3
1	1	1		7,495	7,705							Accountant, .170, .179, .0016	P2
												Disbursement Officer, .250	P2
												Banking and Insurance Officer, 4.164	P2
												Accountant, 4.201	P1
2	2	2		10,329	10,739							Accounting Assistant, .233, .0040, 4.172	WL8
1	1	1		4,841	5,026							Accounting Clerk, .163, 4.166, 4.180, 4.182	WL7
3	3	3		12,218	12,698							Clerk, .162, .168, .0055, 4.174, 4.169, 4.176	WL6
1	1	1		3,788	3,938							Clerk Typist, .167	WL5
		1			2,681							Banking and Insurance Clerk, .0064	WL5
				126,300	132,103							Cost of salaries	
				58,510	60,384							Common Staff Costs	
20	20	21	179,266	184,810	192,487							TOTAL	
												Ch. 3. <u>Management and Personnel Branch</u>	
1	1	1		7,000	7,187							Chief of Branch, 4.138	P5
1	1	1		4,495	4,655							Administrative Officer (Trainee), .0032	P2
												Secretary, .139	WL6
												<u>General Services Section</u>	
1	1	1		11,378	11,420							Administrative Services Officer, .184	P4
												<u>Property Services Unit</u>	
1	1	1		4,900	5,105							Administrative Services Officer, 4.215	P2
3	3	3		13,725	13,885							Administrative Services Assistant, .217	WL8
1	1	2		5,175	7,123							Clerk, .216, .219, .0058	WL6
		1			1,948							Switchboard Operator, .220, .0065	WL6
												Receptionist, .0066	WL6
1	1	1		3,725	3,875							Clerk, 4.224	WL5
1	1	1		4,388	4,475							Switchboard Operator, .221	WL5
												Machine Operator, .207	WL5
1	1	1		3,762	3,892							Machine Operator, 4.204	WL4
												Chauffeur Clerk, .227	WL4
												<u>Records and Communications Unit</u>	
1	1	1		6,310	6,310							Administrative Services Officer, .191	P1
1	1	1		4,288	4,438							Clerk, .193, 4.194	WL6
1	1	1		4,682	4,842							Clerk (Records), .0023	WL6
1	1	1		4,895	5,015							Clerk (Dispatch), .195	WL6
1	1	1		3,686	3,816							Clerk, .200	WL4
1	1	1		3,794	3,924							Clerk Messenger, .244, 4.0507	WL4

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		13,100	13,100
												1	1	1		4,415	4,575
1	1	1		9,013	9,260							3	3	3		25,035	25,702
1	1	1		6,310	6,310							1	1	1		6,310	6,310
1	1	1		5,874	5,925							2	2	2		11,799	11,850
												1	1	1		5,550	5,550
1	1	1		4,068	4,228							1	1	1		4,068	4,228
1	1	1		4,625	4,625							1	1	1		4,625	4,625
												1	1	1		4,088	4,238
1	1	1		10,238	10,499							1	1	1		10,238	10,499
												1	1	1		7,810	8,020
												1	1	1		8,458	8,667
												3	3	3		22,261	22,799
												1	1	1		7,495	7,705
1	1	1		6,706	6,895							1	1	1		6,706	6,895
1	1	1		6,310	6,310							1	1	1		6,310	6,310
1	1	1		4,900	5,105							3	3	3		15,229	15,844
3	3	3		15,062	15,540							4	4	4		19,903	20,566
3	3	3		14,725	14,725							6	6	6		26,943	27,423
												1	1	1		3,788	3,938
														1			2,681
				87,831	89,422											214,131	221,525
				43,742	44,560											102,252	104,944
15	15	15	125,206	131,573	133,982							35	35	36	304,472	316,383	326,469
1	1	1		12,333	12,616							1	1	1		12,333	12,616
												1	1	1		7,000	7,187
												1	1	1		4,495	4,655
												1	1	1		11,378	11,420
1	1	1		7,863	7,880							1	1	1		7,863	7,880
												1	1	1		4,900	5,105
												3	3	3		13,725	13,885
												1	1	2		5,175	7,123
														1		1,948	
1	1	1		4,475	4,475							1	1	1		4,475	4,475
												1	1	1		3,725	3,875
1	1	1		4,855	4,855							1	1	1		4,388	4,475
												1	1	1		4,855	4,855
												1	1	1		3,762	3,892
1	1	1		4,855	4,855							1	1	1		6,310	6,310
												2	2	2		9,143	9,293
												1	1	1		4,682	4,842
												1	1	1		4,895	5,015
												1	1	1		3,686	3,816
1	1	1		3,426	3,556							2	2	2		7,220	7,480

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS	GRADE	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
												Management and Personnel Branch (continued)	
												<u>Management Section</u>	
1	1	1		9,622	9,850							Management Officer, .141	
1	1	1		4,268	4,428							Management Officer, 4.236 Clerk, .0017	
												<u>Personnel Section</u>	
1	1	1		10,282	10,539							Personnel Officer, .148	
1	1	1		7,687	7,898							Recruitment and Staffing Officer .0007	
1	1	1		5,823	5,925							Operations Officer, 4.146	
												Personnel Assistant, .150, 4.144	
												Personnel Clerk, 4.198, 4.218	
2	2	2		8,297	8,617	1	1			4,442		Clerk, .0011, .0057, 9015, 4.0520, 4.189	
						1	1			3,763		Secretary, 4.142	
												Clerk Stenographer, 9316, 4.0521	
												<u>Supply Section</u>	
1	1	1		9,851	10,108							Supply Services Officer, .119	
1	1	1		6,910	7,092							Supply Services Officer, 4.0519	
1	1	1		6,310	6,310							Supply Services Officer, .121	
												Translator, .136	
2	2	2		10,915	10,915							Supply Services Officer, 4.124, 4.187	
1	1	1		4,855	4,855							Clerk, .125, .203	
												Secretary, 4.128	
												Clerk, .253	
												Clerk, 4.131	
												Clerk Typist, 4.130	
				171,023	178,447					8,205		Cost of salaries	
				79,753	82,131					1,881		Common Staff Costs	
30	30	32	243,203	250,776	260,578	2	2		9,684	10,086		TOTAL	
												SECTION 4	
												TEMPORARY PERSONNEL (For text see page 38)	
			13,150	13,000	14,300							Temporary Personnel	
												SECTION 5	
												COMMON SERVICES - HEADQUARTERS (For text see page 38)	
				73,220	119,210							Ch. 1. Rental and Maintenance of Premises	
				1,770	1,770							Ch. 2. Rental and Maintenance of Equipment	
				36,875	39,825							Ch. 3. Communications	
				10,620	10,620							Ch. 4. Other Contractual Services	
				5,310	5,310							Ch. 5. Freight and Other Transportation	
				28,320	29,500							Ch. 6. Supplies	
				6,215	6,215							Ch. 7. Insurance - Non-Staff	
				175	175							Ch. 8. Indemnities Awards and Special Claims	
				10,000	20,000							Ch. 9. Office Equipment	
			146,610	172,505	232,625							TOTAL	



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	ESTIMATED EXPENDITURE			62	63	64	ESTIMATED EXPENDITURE			62	63	64	ESTIMATED EXPENDITURE		
			1962	1963	1964				1962	1963	1964				1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
	1	1		6,310	6,500							1	1	1		9,622	9,850
												1	1	1		6,310	6,500
												1	1	1		4,268	4,428
												1	1	1		10,282	10,539
1	1	1		7,107	7,303							1	1	1		7,687	7,898
1	1	1		5,757	5,959							1	1	1		7,107	7,303
2	2	2		11,100	11,100							2	2	2		11,580	11,884
												2	2	2		11,100	11,100
1	1	2		4,082	8,844							4	4	4		16,821	17,461
1	1	1		4,855	4,855							1	1	1		4,855	4,855
		1			3,913							1	1	1		3,763	3,913
	1	1		8,598	8,808							1	1	1		9,851	10,108
												1	1	1		8,598	8,808
												1	1	1		6,910	7,092
												1	1	1		6,310	6,310
2	2	2		11,310	11,500							2	2	2		11,310	11,500
1	1	1		4,855	4,855							2	2	2		10,915	10,915
												1	1	1		4,855	4,855
1	1	1		4,038	4,188							1	1	1		4,855	4,855
1	1	1		4,338	4,475							1	1	1		4,038	4,188
												1	1	1		4,338	4,475
				110,157	120,537											289,385	298,984
				52,125	56,389											133,759	138,520
19	19	21	159,546	162,282	176,926							51	51	53	412,433	423,144	437,504
			7,000	7,000	7,700										20,150	20,000	22,000
				50,880	82,840											124,100	202,050
				1,230	1,230											3,000	3,000
				25,625	27,675											62,500	67,500
				7,380	7,380											18,000	18,000
				3,690	3,690											9,000	9,000
				19,680	20,500											48,000	50,000
				3,485	3,485											9,700	9,700
				125	125											300	300
				10,000	20,000											20,000	40,000
			103,390	122,095	166,925										250,000	294,600	399,550

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE I		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	ZONE OFFICE - CARACAS (For text see page 39)		
1	1	1		12,990	13,410							Zone Representative, .275		D1
1	1	1		11,805	12,095							Assistant Zone Representative, .8002		P5
1												Public Health Engineer, .8006		P4
1	1	1		9,180	9,420							Public Health Nurse, .8003		P4
1	1	1		7,092	7,285							Administrative Officer, .8004		P4
1	1	1		6,441	6,703							Accounts and Budget Officer, .8008		P2
1	1	1				1	1	1		6,114	6,376	Accounting Assistant, .279		CL6
1	1	1		5,655	5,917							Secretary, .8009, 9017		CL6
1	1	1		6,419	6,681							Personnel Clerk, .8005		CL6
												General Services Clerk, .8010		CL6
1	1	1		5,750	5,968							Records and Communications Clerk, .287		CL5
1	1	1		5,058	5,277							Secretary, .296		CL5
1	1	1		5,186	5,404							Accounting Clerk, .8011		CL5
1	1	1		2,107	2,107							Clerk Stenographer, .8019		CL5
1	1	1		1,223	1,223							Chauffeur-Messenger, .8012		CL2
1	1	1		1,200	1,200							Janitor, .8013		CL1
												Estimated Local Wage Increases		
				80,106	82,690					6,114	6,376	Cost of salaries		
				53,370	56,427					959	989	Common Staff Costs		
				133,476	139,117					7,073	7,365	Cost of Staff		
				7,618	7,618							Duty Travel		
				300	300							Hospitality		
												Common Services		
				3,024	3,024							Space and Equipment Services		
				12,996	12,996							Other Services		
				4,230	4,230							Supplies and Materials		
				585	585							Fixed Charges and Claims		
				2,300	2,300							Acquisition of Capital Assets		
16	12	12	227,294	164,529	170,170	1	1	1	6,517	7,073	7,365	SUB-TOTAL		
			(53,000)	(53,000)	(53,000)				53,000	53,000	53,000	Costs Payable by Government of Venezuela		
16	12	12	174,294	111,529	117,170	1	1	1	59,517	60,073	60,365	TOTAL		
												FRANCE		
												FRENCH ANTILLES AND GUIANA-2, Aedes aegypti Eradication (For text see page 40)		
												Sanitarian, 4.283		P2
												Common Staff Costs		
												Duty Travel		
												Estimated Government Contribution		
												FRENCH ANTILLES AND GUIANA-3, PAHO Fellowships for Health Services (For text see page 40)		
			4,300	4,300	4,300							Fellowships		
			4,300	4,300	4,300							TOTAL - FRANCE		



PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE I		GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	KINGDOM OF THE NETHERLANDS		
												NETHERLANDS ANTILLES-5, Environmental Sanitation (For text see page 40)		
												Fellowships		
												NETHERLANDS ANTILLES-6, WHO/TA Fellowships for Health Services (For text see page 40)		
												Fellowships		
												NETHERLANDS ANTILLES-7, WHO/TA Fellowships for Nursing Services (For text see page 40)		
												Fellowships		
												SURINAM-1, Malaria Eradication (For text see page 40)		
						1	1	1	9,567	9,793		Medical Officer, 9133		P4
						1	1	1	9,118	9,360		Health Educator, 9389		P4
						2	2	2	15,375	15,796		Sanitarian, 9147, 9203		P3
						1	1	1	7,565	7,775		Entomologist, 9088		P3
						1	1	1	6,265	6,453		Sanitarian, 9352		P2
									47,890	49,177		Cost of salaries		
									24,081	28,014		Common Staff Costs		
									12,008	12,008		Duty Travel		
									3,500	3,500		Supplies and Equipment		
						6	6	6	89,956	87,479	92,699			
												Estimated Government Contribution		
												SURINAM AND NETHERLANDS ANTILLES-1, Aedes aegypti Eradication (For text see page 41)		
												Sanitarian, 4.1158, 4.8523		P2
												Common Staff Costs		
												Duty Travel		
												Estimated Government Contribution		
												SURINAM AND NETHERLANDS ANTILLES-2, PAHO Fellowships for Health Services (For text see page 41)		
			4,300	4,300	4,300							Fellowships		
			4,300	4,300	4,300	6	6	6	89,956	87,479	92,699	TOTAL - KINGDOM OF THE NETHERLANDS		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									3,400	2,150	2,150				3,400	2,150	2,150
										4,500	4,500					4,500	4,500
										3,275	3,275					3,275	3,275
												6	6	6	89,956	87,479	92,699
															(130,000)	(80,000)	(80,000)
	1			6,250		1	1	1	6,265	6,453							
				2,735					3,521	4,629							
				2,933					1,500	1,500							
	1			11,918		1	1	1	16,687	11,286	12,582	1	2	1	16,687	23,204	12,582
															(40,000)	(40,000)	(40,000)
															4,300	4,300	4,300
	1			11,918		1	1	1	20,087	21,211	22,507	7	8	7	114,343	124,908	119,506

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE I		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>UNITED KINGDOM</u>		
												<u>BAHAMAS-1, Aedes aegypti Eradication</u> (For text see page 41)		
												Sanitarian, 4.8505		P2
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>BAHAMAS-3, Health Services</u> (For text see page 41)		
												Medical Officer, 4.8527		P4
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												<u>BRITISH GUIANA-5, Malaria Eradication</u> (For text see page 41)		
						2	2	2	12,778	13,158		Sanitarian, 9357, 9422		P2
									7,633	7,667		Common Staff Costs		
									600	600		Short-term Consultants Travel		
									4,328	4,328		Duty Travel		
									20,311	20,965		Supplies and Equipment		
									2,148			Fellowships		
						2	2	2	38,411	47,798	46,718			
												Estimated Government Contribution		
												<u>BRITISH GUIANA-10, National Health Services</u> (For text see page 42)		
												Medical Officer, 4.8508 Sanitary Engineer, 4.8521		P4 P4
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Estimated Government Contribution		

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962 1963 1964			62 63 64			1962 1963 1964			62 63 64			1962 1963 1964			
			\$						\$						\$			
							1	1	1		6,265	6,452						
											4,435	5,619						
											1,200	1,200						
											700							
							1	1	1	7,366	12,600	13,271	1	1	1	7,366	12,600	13,271
																(50,000)	(50,000)	(50,000)
								1	1		6,698	9,117						
											5,245	5,200						
											840	840						
											4,300	4,300						
								1	1		17,083	19,457		1	1		17,083	19,457
1	1	1		9,118	9,360													
1	1	1		9,118	9,360													
				18,236	18,720													
				7,122	9,614													
				1,840	1,840													
2	2	2	25,099	27,198	30,174								2	2	2	25,099	27,198	30,174
																(350,000)	(350,000)	(350,000)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE I		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>BRITISH VIRGIN ISLANDS-1, Aedes aegypti Eradication</u> (For text see page 42)		
												Sanitarian, 4.907		P2
												Common Staff Costs		
												Duty Travel		
												Estimated Government Contribution		
												<u>JAMAICA-2, Malaria Eradication</u> (For text see page 42)		
						1						Medical Officer, 9129		P4
						1						Health Educator, 9305		P4
						2	1	1	7,060		7,250	Sanitarian, 9065, 9066		P2
									7,060		7,250	Cost of salaries		
									3,014		2,764	Common Staff Costs		
									1,560		1,560	Duty Travel		
									570			Supplies and Equipment		
						4	1	1	61,727	12,204	11,574	Estimated Government Contribution		
												<u>JAMAICA-4, Department of Preventive Medicine (UCWI)</u> (For text see page 42)		
												Medical Educator, 4.8520		P4
												Common Staff Costs		
												Duty Travel		
				4,300								Fellowships		
				4,300								Estimated Government Contribution		
												<u>JAMAICA-11, Public Health Training Station</u> (For text see page 43)		
												Short-term Consultants		
												Fees		
												Travel		
												Estimated Government Contribution		
												<u>JAMAICA-13, Aedes aegypti Eradication</u> (For text see page 43)		
												Sanitarian, 4.8526		P2
												Common Staff Costs		
												Duty Travel		



## WORLD HEALTH ORGANIZATION

## T O T A L S

REGULAR BUDGET			TECHNICAL ASSISTANCE FUNDS									T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						1	1	1		6,642	6,832						
										4,886	6,022						
										1,440	1,440						
						1	1	1	12,893	12,968	14,294	1	1	1	12,893	12,968	14,294
															(50,000)	(50,000)	(50,000)
												4	1	1	61,727	12,204	11,574
															(300,000)	(200,000)	(200,000)
	1	1		6,698	9,118												
				5,206	4,803												
				510	510												
					4,300												
	1	1		12,414	18,731								1	1		16,714	18,731
																(75,000)	(75,000)
				2,800													
				3,600													
			3,200	6,400											3,200	6,400	
															(75,000)	(75,000)	
							1	1		6,265	6,452						
										3,901	5,025						
										1,600	1,600						
							1	1		11,766	13,077		1	1		11,766	13,077

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE I	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
									1,650				<u>TRINIDAD-3, Malaria Eradication</u> (For text see page 43)  Fellowships	
													<u>WEST INDIES-1, Aedes aegypti Eradication</u> (For text see page 43)  Sanitarian, 4.908, 4.994  Common Staff Costs  Duty Travel   Estimated Government Contribution	P2
													<u>WEST INDIES-3, Nursing Services</u> (For text see page 43)  Public Health Nurse, 4.8501, 4.8510  Common Staff Costs  Duty Travel   Estimated Government Contribution	P3
			4,300	4,300	4,300								<u>WEST INDIES-4, PAHO Fellowships for Health Services</u> (For text see page 44)  Fellowships	
													<u>WEST INDIES-6, Public Health Legislation</u> (For text see page 44)  All Purposes	
1	2	2		12,512	15,953								<u>WEST INDIES-12, Nursing Education</u> (For text see page 44)  Nurse Educator, .8020, .8029  Common Staff Costs  Duty Travel  Fellowships	P3
				7,694	7,592									
				1,000	1,000									
				4,300	4,300									
1	2	2	6,119	25,506	28,845								Estimated Government Contribution   <u>WEST INDIES-18, Promotion of Community Water Supplies</u> (For text see page 44)  Sanitary Engineer, 4.8524 Draftsman, 9402  Common Staff Costs  Duty Travel	P4 P1
										4,950	5,143			
									2,773	3,909				

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															1,650		
						2	2	2		12,747	13,127						
										6,825	7,095						
										2,127	2,127						
						2	2	2	18,871	21,699	22,349	2	2	2	18,871	21,699	22,349
															(375,000)	(375,000)	(375,000)
1	1	1		7,618	7,828	1	1	1		8,160	8,370						
				3,571	4,212					3,275	2,914						
				2,592	2,592					2,823	2,823						
1	1	1	12,107	13,781	14,632	1	1	1	13,631	14,258	14,107	2	2	2	25,738	28,039	28,739
															(175,000)	(175,000)	(175,000)
															4,300	4,300	4,300
									3,500						3,500		
												1	2	2	6,119	25,506	28,845
															(150,000)	(150,000)	(150,000)
						1	1			8,930	9,180						
										4,945	3,593						
										2,238	5,087						

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE I	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
													WEST INDIES-18, (continued)	
													Supplies and Equipment	
													Fellowships	
						1	1	1	7,857	7,723	9,052			
													WINDWARD ISLANDS-2, Malaria Eradication (For text see page 44)	
						2	1	1		7,285	7,495		Sanitarian, 9067, 9132	P2
										7,501	6,522		Common Staff Costs	
										1,304	1,304		Duty Travel	
										621	535		Supplies and Equipment	
										895			Fellowships	
						2	1	1	27,995	17,606	15,856		Estimated Government Contribution	
1	2	2	10,419	34,106	33,145	9	5	5	137,640	85,331	83,200		TOTAL - UNITED KINGDOM	
													VENEZUELA	
													VENEZUELA-2, Mental Health (For text see page 45)	
													All Purposes	
													VENEZUELA-7, Malaria Eradication (For text see page 45)	
									830				Fellowships	
			4,300	8,600	8,600								VENEZUELA-9, PAHO Fellowships for Health Services (For text see page 45)	
													Fellowships	
													VENEZUELA-11, Plague Investigation (For text see page 45)	
				2,800	2,100								Short-term Consultants	
				3,600	2,700								Fees	
				6,400	4,800								Travel	
													VENEZUELA-14, Nursing Education (For text see page 45)	
													Nurse Educator, 4.8507	P3
													Common Staff Costs	
					1,400								Short-term Consultants	
					1,800								Fees	
													Travel	

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962 1963 1964			62 63 64			1962 1963 1964			62 63 64			1962 1963 1964		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
										3,250							
										2,638	2,638						
						1	1			22,001	20,498	1	2	2	7,857	29,724	29,550
												2	1	1	27,995	17,606	15,856
															(31,500)	(31,500)	(31,500)
3	4	4	40,406	59,793	63,537	5	8	8	56,261	112,375	117,053	18	19	19	244,726	291,605	296,935
			3,400												3,400		
															830		
															4,300	8,600	8,600
																6,400	4,800
						1	1	1		7,670	7,880						
										7,036	8,142						

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE I	GRADE	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
													VENEZUELA-14, (continued)
													Duty Travel
													Fellowships
			4,300	8,600	11,800								Estimated Government Contribution
													VENEZUELA-15, Health Aspects of Radiation (For text see page 45)
													Short-term Consultants
													Fees
													Travel
													Fellowships
			4,300	4,300	3,200								
													VENEZUELA-16, Aedes aegypti Eradication (For text see page 45)
1	1	1		10,888	11,148								Medical Officer, .4004
2	2	1		14,805	7,880								Sanitarian, .4005, .4007
				25,693	19,028								Cost of salaries
				25,986	22,040								Common Staff Costs
				7,505	5,700								Duty Travel
3	3	2	57,456	59,184	46,768								Estimated Government Contribution
													VENEZUELA-17, Medical Education (For text see page 46)
1													Medical Educator, .8027
				4,200	4,200								Short-term Consultants
				5,400	5,400								Fees
				8,600	8,600								Travel
													Fellowships
1			19,088	18,200	18,200								
													VENEZUELA-18, National Institute of Hygiene (For text see page 46)
				1,400	1,400								Short-term Consultants
				1,800	1,800								Fees
				4,300	4,300								Travel
													Fellowships
			7,500	7,500	7,500								

P4  
P2

P4

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
										570	570						
						1	1	1	10,271	15,276	16,592	1	1	1	14,571	23,876	28,392
															(225,000)	(225,000)	(225,000)
															4,300	4,300	3,200
												3	3	2	57,456	59,184	46,768
															(1,500,000)	(1,500,000)	(1,500,000)
												1			19,088	18,200	18,200
															7,500	7,500	7,500

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE I		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>VENEZUELA-19, School of Public Health</u> (For text see page 46)  Health Educator, 4.8519  Common Staff Costs  Duty Travel  Fellowships		P4
												<u>VENEZUELA-20, Public Health Aspects of Accident Prevention</u> (For text see page 46)  All Purposes		
			1,750									<u>VENEZUELA-24, Consultant Services in Health</u> (For text see page 46)  Short-term Consultants Fees Travel		
												<u>VENEZUELA-27, Promotion of Community Water Supplies</u> (For text see page 47)  Sanitary Engineer, 9432  Common Staff Costs  Short-term Consultants Fees Travel  Duty Travel		P4
							1	1		6,698	9,118			
										7,693	7,263			
										1,050	1,050			
										1,350	1,350			
										1,140	1,140			
							1	1	12,800	17,931	19,921			
												<u>VENEZUELA-28, Industrial Hygiene</u> (For text see page 47)  Fellowships		
			4,300	4,300	4,300							<u>VENEZUELA-29, Planning and Organization of Hospital Services</u> (For text see page 47)  Medical Officer, 4.8512  Common Staff Costs  Duty Travel  Fellowships		P4



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		9,118	9,360												
				7,562	8,257												
				380	380												
				1,700	4,300												
1	1	1	15,567	18,760	22,297							1	1	1	15,567	18,760	22,297
															1,750		
				4,200	8,400												
				5,400	10,800												
			3,200	9,600	19,200										3,200	9,600	19,200
													1	1	12,800	17,931	19,921
															4,300	4,300	4,300
	1	1		9,118	9,360												
				7,562	8,257												
				950	950												
				4,300	4,300												
	1	1	4,300	21,930	22,867							1	1	4,300	21,930	22,867	



WORLD HEALTH ORGANIZATION												T O T A L S					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	15,281	17,581	19,017
															3,200		
																3,200	1,750
													1				18,797
																	4,800
1	2	2	26,467	50,290	64,364	1	1	1	10,271	15,276	16,592	7	8	8	171,843	221,362	250,409
						1	1	1		11,420	11,420					8,096	5,896
										4,971	4,971						
						1	1	1	26,731	24,487	22,287	1	1	1	26,731	27,487	25,287

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE I		GRADE
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
													AMRO-47, Yaws Eradication and Venereal Disease Control (Caribbean) (For text see page 48) Medical Officer, 4.1083 Common Staff Costs Duty Travel	P4
													Estimated Government Contribution	
													AMRO-95, Environmental Sanitation (Caribbean) (For text see page 49) Sanitary Engineer, 4.1106 Sanitarian, 4.1170 Sanitarian, .8014, .8026 Cost of salaries Common Staff Costs Duty Travel	P4 P3 P2
1	2	2		11,462	13,310									
				11,462	13,310									
				9,127	9,757									
				5,000	5,000									
1	2	2	12,760	25,589	28,067									
													Estimated Government Contribution	
													AMRO-117, Malaria Technical Advisory Services (Zone I) (For text see page 49) Chief Zone Malaria Adviser, 9086 Epidemiologist, 9200 Entomologist, 9088 Laboratory Adviser, 9087 Secretary, 9107 Cost of salaries Common Staff Costs Duty Travel Supplies and Equipment Common Services	P5 P4 P3 P2 JL4
						1	1	1	11,926	12,216				
						1	1	1	10,715	10,975				
						1								
						1	1	1	6,595	6,785				
						1	1	1	2,223	2,329				
									31,459	32,305				
									34,839	20,825				
									7,744	7,744				
									600	600				
									1,680	1,680				
						5	4	4	70,630	76,322	63,154			

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62			1962			62			1962			62			1962		
63	64		1963	1964		63	64		1963	1964		63	64		1963	1964	
			\$	\$					\$	\$					\$	\$	
1	1	1		9,774	10,022												
				6,175	5,416												
				3,222	3,222												
1	1	1	19,572	19,171	18,660							1	1	1	19,572	19,171	18,660
															(115,000)	(115,000)	(115,000)
						1	1	1	9,832	10,087							
						1	1	1	7,968	8,178							
									17,800	18,265							
									10,772	11,115							
									5,022	5,022							
						2	2	2	31,933	33,594	34,402	3	4	4	44,693	59,183	62,469
															(780,000)	(780,000)	(780,000)
												5	4	4	70,630	76,322	63,154

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE I		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-134, Training Center for Malaria Eradication (Kingston)</u> (For text see page 49)		
						1	1	1		11,316	11,560	Chief, Training Center, 9108		P5
						1	1	1		8,703	8,913	Sanitarian, 9116		P3
						1	1	1		7,139	7,338	Administrative Officer, 9114		P2
						3	3	3		9,226	9,562	Secretary, 9115, 9141, 9205		JL6
						1	1	1		1,045	1,101	Cleaner-Messenger, 9278		JL1
										37,429	38,474	Cost of salaries		
										16,350	22,237	Common Staff Costs		
										4,000	4,000	Short-term Consultants		
										3,000	3,000	Fees Travel		
										2,492	2,492	Duty Travel		
										4,500	3,000	Supplies and Equipment		
										8,350	8,350	Common Services		
						7	7	7	72,957	76,121	81,553			
1	1	1		9,118	9,360							<u>AMRO-157, Health Statistics (Zone I)</u> (For text see page 49)		
				4,803	5,986							Statistician, .8000		P4
				2,922	2,922							Common Staff Costs		
												Duty Travel		
1	1	1	14,442	16,843	18,268							Estimated Government Contribution		
												<u>AMRO-204, Sanitary Engineering (Zone I)</u> (For text see page 49)		
	1	1		11,357	11,420							Sanitary Engineer, .8006		P4
	1	1		6,135	6,397							Secretary, .8009		CL6
				17,492	17,817							Cost of salaries		
				11,802	10,067							Common Staff Costs		
				3,000	3,000							Duty Travel		
				8,600	17,200					3,000	8,000	Fellowships		
										3,000		Supplies and Equipment		
	2	2		40,894	48,084					6,000	8,000			

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62 63 64

1962 1963 1964

62 63 64

1962 1963 1964

62 63 64

1962 1963 1964

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												7	7	7	72,957	76,121	81,553
												1	1	1	14,442	16,843	18,268
															(75,000)	(75,000)	(75,000)
			4,300										2	2	4,300	46,894	56,084

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE I	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
			42,586										AMRO-245, Training Course on Nursing Supervision and Administration (Zone I) (For text see page 50) All Purposes	
													AMRO-269, Nutrition Advisory Services (Zone I) (For text see page 50) Nutrition Adviser, 4.8518 Common Staff Costs Duty Travel	P4
													AMRO-289, Nursing (Zone I) (For text see page 50) Public Health Nurse, .8003 Secretary, .296 Cost of salaries Common Staff Costs Duty Travel	P4 CL5
	1	1		9,717	9,957									
	1	1		5,568	5,786									
				15,285	15,743									
				8,168	7,559									
				3,000	3,000									
	2	2		26,453	26,302									
													AMRO-312, Rabies Control (Zone I) (For text see page 50) Short-term Consultants Fees Travel Fellowships	
					4,200									
					5,400									
					4,308									
					13,900									
													AMRO-324, Planning (Zone I) (For text see page 50) Short-term Consultants Fees Travel Fellowships	
					2,800									
					3,600									
					6,300									
					12,700									
2	7	7	69,788	112,779	150,321	12	11	11	143,587	158,443	152,707		TOTAL - INTERCOUNTRY PROGRAMS	
7	12	12	195,001	275,769	322,581	28	24	24	400,094	366,765	367,544		TOTAL - ZONE I PROGRAMS	



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															42,586		
1	1	1		9,280	9,512												
				6,368	5,372												
				2,223	2,223												
1	1	1	13,712	17,871	17,107							1	1	1	13,712	17,871	17,107
													2	2		26,453	26,302
																	13,900
																	12,700
2	2	2	37,584	37,042	35,767	3	3	3	58,664	58,081	56,689	19	23	23	309,623	366,345	395,484
6	9	8	104,457	159,043	163,668	11	14	14	151,950	217,185	224,371	52	59	58	851,502	1,018,762	1,078,164

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - MEXICO, D.F.</u> (For text see page 39)		
1	1	1		14,525	14,525							Zone Representative, .300		D1
												Assistant Zone Representative, 4.302		P5
												Sanitary Engineer, 4.303		P4
1	1	1		9,195	9,434							Nurse, .304		P4
1	1	1		7,338	7,548							Administrative Officer, .305		P4
												Accounts and Budget Officer, .2009		P2
1	1	1		3,761	3,888							Administrative Services Assistant, .310		ML7
1	1	1		3,632	3,761							Accountant, .330		ML7
1	1	1		2,971	3,083	1	1	1		3,269	3,381	Accounting Clerk, .341		ML6
												Clerk, 9124		ML6
5	2	2		5,304	5,496							Clerk Stenographer, .308, .309, .331, .332, .349		ML5
1	1	1		2,432	2,528	1	1	1		2,664	2,760	Clerk, .2010, 9123		ML5
1	1	1		1,893	1,904							Chauffeur, .311		ML3
1	1	1		1,509	1,573							Clerk, .368		ML3
1	1	1		1,416	1,416							Janitor, .340		ML1
				2,500	2,500							Estimated Local Wage Increases		
				56,476	57,656					5,933	6,141	Cost of salaries		
				23,714	22,278					868	904	Common Staff Costs		
				80,190	79,934					6,801	7,045	Cost of Staff		
				5,070	5,070							Duty Travel		
				300	300							Hospitality		
				10,755	10,950							Common Services		
				10,550	11,250							Space and Equipment Services		
				2,650	2,950							Other Services		
				320	320							Supplies and Materials		
				1,100	500							Fixed Charges and Claims		
												Acquisition of Capital Assets		
16	12	12	135,542	110,935	111,274	2	2	2	6,564	6,801	7,045	TOTAL		
												<u>CUBA</u>		
												<u>CUBA-1, Aedes aegypti Eradication</u> (For text see page 51)		
1	1	1		10,238	10,498							Medical Officer, .336		P4
2	2	2		14,109	14,499							Sanitarian, .344, .2025		P2
				24,347	24,997							Cost of salaries		
				19,365	22,278							Common Staff Costs		
				6,600	6,600							Duty Travel		
				20,000	20,000							Supplies and Equipment		
3	3	3	68,757	70,312	73,875							Estimated Government Contribution		
												<u>CUBA-3, Public Health Services</u> (For text see page 51)		
1												Chief Country Adviser, 4.374		P5
												Medical Officer, .2033		P4
												Sanitary Engineer, 4.2500		P4
												Public Health Nurse, 4.375, 4.2515		P3
												Cost of salaries		

WORLD HEALTH ORGANIZATION

TOTALS

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62			1962			62			1962			62			1962		
63	64		\$	\$	\$	63	64		\$	\$	\$	63	64		\$	\$	\$
1	1	1		12,020	12,308							1	1	1		14,525	14,525
1												1	1	1		12,020	12,308
												1		1		9,195	9,434
												1	1	1		7,338	7,548
												1	1	1		3,761	3,888
												1	1	1		3,632	3,761
												1	1	1		2,971	3,083
												1	1	1		3,269	3,381
												5	2	2		5,304	5,496
												2	2	2		5,096	5,288
												1	1	1		1,893	1,904
												1	1	1		1,509	1,573
												1	1	1		1,416	1,416
																2,500	2,500
				12,020	12,308											74,429	76,105
				5,083	7,382											29,665	30,564
				17,103	19,690											104,094	106,669
				2,020	2,020											7,090	7,090
																300	300
				1,195	1,216											11,950	12,166
				1,172	1,250											11,722	12,500
				295	327											2,945	3,277
				36	36											356	356
																1,100	500
2	1	1	39,996	21,821	24,539							20	15	15	182,102	139,557	142,858
												3	3	3	68,757	70,312	73,875
															1,200,000	1,200,000	1,200,000
						1	1	1								11,757	12,047
						1	1	1								9,117	9,360
						1	2	2								16,023	16,443
																36,897	37,850

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE II	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
													CUBA-3, (continued)	
													Common Staff Costs	
													Duty Travel	
													Fellowships	
1			10,047										Estimated Government Contribution	
													<u>CUBA-4, Nursing Education</u> (For text see page 51)	
													Nurse Educator, 4.2508, 4.2516	P3
													Public Health Nurse, 4.2515	P3
													Common Staff Costs	
													Duty Travel	
													Estimated Government Contribution	
													<u>CUBA-5, Malaria Eradication</u> (For text see page 51)	
													Medical Officer, 4.2520	P4
													Sanitary Engineer, 4.2521	P4
													Entomologist, 4.2522	P3
													Sanitarian, 4.2523	P2
													Sanitarian, 4.2524	P1
													Cost of salaries	
													Common Staff Cost	
													Duty Travel	
													Supplies and Equipment	
													Fellowships	
													Estimated Government Contribution	
													<u>CUBA-6 (PAHO), CUBA-200 (WHO), Fellowships for Health Services</u> (For text see page 51)	
			8,600										Fellowships	
													<u>CUBA-14, Refuse Disposal</u> (For text see page 51)	
													Fellowships	
4	3	3	87,404	70,312	73,875								TOTAL - CUBA	

1/ Funded from the Malaria Eradication Special Account.

## WORLD HEALTH ORGANIZATION

## T O T A L S

WORLD HEALTH ORGANIZATION												T O T A L S					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
										16,830	18,352						
										3,475	3,475						
										4,300	4,300						
						3	4	4	37,130	61,502	63,977	4	4	4	47,177	61,502	63,977
															(1,000,000)	(1,000,000)	(1,000,000)
1						1	1	1		7,618	7,828						
						1				4,515	5,646						
										1,000	1,000						
1			16,160			2	1	1	23,870	13,133	14,474	3	1	1	40,030	13,133	14,474
															(500,000)	(500,000)	(500,000)
1	1	1		10,173	10,433												
1	1	1		10,065	10,325												
1	1	1		7,618	7,828												
1	1	1		6,282	6,469												
1	1	1		5,219	5,406												
				39,357	40,461												
				22,208	25,182												
				7,510	7,510												
				10,000	10,000												
				4,300	4,300												
5	5	5	1/76,960	1/83,375	1/87,453							5	5	5	76,960	83,375	87,453
															(1,000,000)	(1,000,000)	(1,000,000)
				8,600	8,600										8,600	8,600	8,600
									4,800						4,800		
6	5	5	93,120	91,975	96,053	5	5	5	65,800	74,635	78,451	15	13	13	246,324	236,922	248,379

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>DOMINICAN REPUBLIC</u>		
												<u>DOMINICAN REPUBLIC-2, Malaria Eradication</u> (For text see page 51)		
						1	1	1		10,000	10,260	Medical Officer, 9029		P4
						1	1	1		10,173	10,433	Sanitary Engineer, 9040		P4
						3	3	3		20,562	21,125	Sanitarian, 9031, 9036, 9038		P2
										40,735	41,818	Cost of salaries		
										33,323	34,590	Common Staff Costs		
										8,770	8,770	Duty Travel		
										3,500	3,500	Supplies and Equipment		
										4,300	4,300	Fellowships		
						5	5	5	87,854	90,628	92,978	Estimated Government Contribution		
												<u>DOMINICAN REPUBLIC-3, Nursing Education</u> (For text see page 52)		
												Nurse Educator, 4.372, 4.2527		P3
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												<u>DOMINICAN REPUBLIC-4, Public Health Services</u> (For text see page 52)		
1	1	1		12,260	12,548							Chief Country Adviser, .342		P5
1	1	1		9,290	9,529							Sanitary Engineer, .353		P4
												Health Educator, 4.2528		P4
1	1	1		7,618	7,828							Public Health Nurse, .343		P3
												Public Health Laboratory Adviser, 4.2529		P3
				29,168	29,905							Cost of salaries		
				20,160	18,292							Common Staff Costs		
				2,400	2,400							Duty Travel		
				200	200							Supplies and Equipment		
3	3	3	59,933	51,928	50,797							Estimated Government Contribution		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												5	5	5	87,854	90,628	92,978
															(700,000)	(700,000)	(700,000)
1	2	2		12,888	15,725												
				9,512	9,709												
				2,000	2,174												
				500	500												
				4,300	8,600												
1	2	2	12,267	29,200	36,708							1	2	2	12,267	29,200	36,708
															(200,000)	(200,000)	(200,000)
	1	1		5,953	9,097												
	1	1		4,974	7,600												
				10,927	16,697												
				11,673	14,793												
				1,600	2,400												
	2	2		24,200	33,890							3	5	5	59,933	76,128	84,687
															(400,000)	(400,000)	(400,000)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	DOMINICAN REPUBLIC-8, <u>Aedes aegypti</u> <u>Eradication</u> (For text see page 52)		
1	1	1		9,235	9,472							Medical Officer, .2028		P4
1	1	1		5,610	5,797							Sanitarian, .2029		P1
				14,845	15,269							Cost of salaries		
				10,215	10,153							Common Staff Costs		
				3,795	3,795							Duty Travel		
2	2	2	27,939	28,855	29,217							Estimated Government Contribution		
												DOMINICAN REPUBLIC-11, PAHO <u>Fellowships for Health Services</u> (For text see page 52)		
			4,300	8,600	12,900							Fellowships		
												DOMINICAN REPUBLIC-15, <u>Promotion of</u> <u>Community Water Supplies</u> (For text see page 52)		
												Water Supply Consultant, 4.2531		P4
												Common Staff Costs		
										5,250	5,250	Short-term Consultants Fees		
										6,750	6,750	Travel		
												Duty Travel		
												Supplies and Equipment		
										12,000	12,000			
												DOMINICAN REPUBLIC-16, <u>Veterinary</u> <u>Medical Education</u> (For text see page 52)		
												Public Health Veterinarian, 4.2530		P4
												Common Staff Costs		
												Duty Travel		
												DOMINICAN REPUBLIC-52, <u>Yaws</u> <u>Eradication</u> (For text see page 53)		
1	1	1		10,282	10,542							Medical Officer, .320		P4
1				10,429	7,654							Serologist, .2008		P3
				1,250	1,250							Common Staff Costs		
												Duty Travel		
2	1	1	38,076	21,961	19,446							Estimated Government Contribution		
7	6	6	130,248	111,344	112,360	5	5	5	87,854	102,628	104,978	TOTAL - DOMINICAN REPUBLIC		



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												2	2	2	27,939	28,855	29,217
															(400,000)	(400,000)	(400,000)
															4,300	8,600	12,900
							1	1		9,117	9,360						
										6,543	7,729						
										1,200	1,200						
										200	200						
							1	1		17,060	18,489		1	1		29,060	30,489
							1	1		9,117	9,360						
										6,543	7,729						
										1,250	1,350						
							1	1		16,910	18,439		1	1		16,910	18,439
												2	1	1	38,076	21,961	19,446
															(150,000)	(150,000)	(150,000)
1	4	4	12,267	53,400	70,598	2	2		33,970	36,928		13	17	17	230,369	301,342	324,864

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>HAITI</u>		
												<u>HAITI-1, Yaws Eradication</u> (For text see page 53)		
												Medical Officer, 4.323 Sanitarian, 4.364		
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
												Estimated Government Contribution		
												<u>HAITI-4, Malaria Eradication</u> (For text see page 53)		
						1	1	1	10,975	11,233		Chief Country Malaria Adviser, 9080		
						1	1	1	9,623	9,851		Epidemiologist, 9079		
						1	1	1	9,114	9,355		Health Educator, 9144		
						1	1	1	9,737	9,978		Sanitary Engineer, 9046		
						1	2	2	12,125	12,495		Sanitarian, 9048, 9420		
						2	2	2	10,891	11,266		Sanitarian, 9257, 9258		
									62,465	64,178		Cost of salaries		
									42,859	39,127		Common Staff Costs		
									12,925	12,925		Duty Travel		
									2,500	2,500		Supplies and Equipment		
									1,000	1,000		Common Services		
									4,500	4,500		Fellowships		
						7	8	8	103,591	126,249	124,230	Estimated Government Contribution		
												<u>HAITI-9, Public Health Laboratory</u> (For text see page 53)		
1	1	1		9,547	9,775							Laboratory Adviser, .339		
				4,244	6,765							Common Staff Costs		
				450	450							Duty Travel		
				2,500	2,500							Supplies and Equipment		
1	1	1	14,986	16,741	19,490							Estimated Government Contribution		
												<u>HAITI-12, PAHO Fellowships for Health Services</u> (For text see page 53)		
			4,300	4,300	4,300							Fellowships		

## WORLD HEALTH ORGANIZATION

## T O T A L S

REGULAR BUDGET									TECHNICAL ASSISTANCE FUNDS						T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$				\$	\$	\$			
1	1	1		9,555	9,775															
1	1	1		7,880	7,880															
				17,435	17,655															
				9,978	10,024															
				2,175	2,175															
				10,000																
2	2	2	29,081	39,588	29,854							2	2	2	29,081	39,588	29,854			
															(96,000)	(96,000)	(96,000)			
												7	8	8	103,591	126,249	124,230			
															(114,546)	(124,773)	(129,030)			
												1	1	1	14,986	16,741	19,490			
															(25,000)	(25,000)	(25,000)			
															4,300	4,300	4,300			

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE II	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>HAITI-16, National Health Services</u> (For text see page 53)		
1												Chief Country Adviser, 4.2507 Medical Officer, .2040, 4.2526 Sanitary Engineer, 4.2513 Health Educator, 4.2519 Public Health Nurse, 4.2509		P5 P4 P4 P4 P3
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
			11,658									Estimated Government Contribution		
												<u>HAITI-19, Medical Education</u> (For text see page 54)		
1	1	1		9,491	9,718							Professor of Physiology, .2021		P4
				6,619	8,106							Common Staff Costs		
				950	950							Duty Travel		
				500								Supplies and Equipment		
				4,300								Fellowships		
1	1	1	22,400	21,860	18,774							Estimated Government Contribution		
												<u>HAITI-20, Nutrition</u> (For text see page 54)		
1	1	1		9,211	9,491							Nutrition Adviser, .2034		P4
				6,741	3,922							Common Staff Costs		
				1,000	1,000							Duty Travel		
				100	100							Supplies and Equipment		
					4,300							Fellowships		
1	1	1	15,719	17,052	18,813							Estimated Government Contribution		
												<u>HAITI-22, Promotion of Community Water Supplies</u> (For text see page 54)		
						1	1	1	9,114	9,375		Sanitary Engineer, 9362		P4
									4,130	5,295		Common Staff Costs		
									3,150	3,150		Short-term Consultants		
									3,550	3,550		Fees		
												Travel		
									1,575	1,575		Duty Travel		
						1	1	1	18,435	21,519	22,945	Estimated Government Contribution		
4	3	3	69,063	59,953	61,377	8	9	9	122,026	147,768	147,175	TOTAL - HAITI		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62			63			64			1962			1963			1964		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
	1	1		5,953	9,097	1	1	1		11,105	11,357						
						1	1	1		9,493	9,717						
						1	1	1		9,117	9,360						
						1	1	1		7,653	7,863						
										37,368	38,297						
			5,347	6,648						18,353	20,589						
			800	1,200						3,890	3,890						
										200	200						
										4,300	4,300						
	1	1	12,100	16,945		4	4	4	61,226	64,111	67,276	5	5	5	72,884	76,211	84,221
															(100,000)	(100,000)	(100,000)
												1	1	1	22,400	21,860	18,774
															(100,000)	(100,000)	(100,000)
												1	1	1	15,719	17,052	18,813
												1	1	1	18,435	21,519	22,945
															(243,442)	(267,134)	(275,000)
2	3	3	29,081	51,688	46,799	4	4	4	61,226	64,111	67,276	18	19	19	281,396	323,520	322,627



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	2	17,193	16,626	30,880
															(30,000)	(30,000)	(30,000)
1	1	1		10,850	11,105												
1	1	1		10,433	10,693												
1	1	1		9,114	9,355												
1	1	1		7,618	7,828												
1	1	1		6,735	6,923												
				44,750	45,904												
				21,697	27,907												
				4,385	4,385												
				300	500												
5	5	5	63,302	71,132	78,696							6	6	6	81,108	89,092	97,171
															1,000,000	1,000,000	1,000,000
									4,600	4,600						4,600	4,600
															4,300	8,600	8,600
												2	2		25,603	28,919	
															(200,000)	(200,000)	

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE II	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
													<u>MEXICO-28, Public Health Laboratory</u> (For text see page 55)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships	
			7,875	14,900	10,625									
													Estimated Government Contribution  <u>MEXICO-29, Leprosy Control</u> (For text see page 55)  Medical Officer, 4.2514  Common Staff Costs  Duty Travel  Supplies and Equipment	P4
													Estimated Government Contribution  <u>MEXICO-30, School of Public Health</u> (For text see page 55)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships	
													Estimated Government Contribution  <u>MEXICO-32, Medical Education</u> (For text see page 55)  Short-term Consultants Fees Travel  Fellowships	
				12,900										
				12,900										
													<u>MEXICO-34, Teaching of Public Health in Schools of Veterinary Medicine</u> (For text see page 55)  Short-term Consultants Fees Travel  Fellowships	



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															7,875	14,900	10,625
															(100,000)	(100,000)	(100,000)
1	1	1		9,453	9,680												
				3,918	6,299												
				1,015	1,015												
				100	100												
1	1	1	16,511	14,486	17,094							1	1	1	16,511	14,486	17,094
															(300,000)	(300,000)	(300,000)
				1,400	1,400												
				1,800	1,800												
				1,500													
				4,300	4,300												
			7,500	9,000	7,500										7,500	9,000	7,500
															(150,000)	(150,000)	(150,000)
				2,100	2,100												
				2,700	2,700												
					12,900												
			5,900	4,800	17,700										5,900	17,700	17,700
				2,800	2,800												
				3,600	3,600												
				4,300													
			7,500	10,700	6,400										7,500	10,700	6,400

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>MEXICO-35, Environmental Sanitation Training</u> (For text see page 56)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships		
												<u>MEXICO-38, Tuberculosis Control</u> (For text see page 56)  Medical Officer, 4.2511  Common Staff Costs  Duty Travel  Fellowships		P4
												Estimated Government Contribution  <u>MEXICO-39, Promotion of Community Water Supplies</u> (For text see page 56)  1    1    1                      9,610    9,813    Sanitary Engineer, 9366  5,457    9,511    Common Staff Costs  2,450    2,450    Short-term Consultants 3,150    3,150        Fees 2,450    2,450        Travel  2,450    2,450    Duty Travel		P4
						1	1	1	25,699	23,117	27,374			
												<u>MEXICO-53, Malaria Eradication</u> (For text see page 56)  1    1    1                      10,845    11,105    Chief Country Malaria Adviser, 4,338 1    1    1                      9,415    9,640    Medical Officer, 9350 Malariaologist, 4.360 1    1    1                      8,090    8,300    Health Educator, 9268 Sanitary Engineer, 4.361 Assistant Engineer, 9274 Sanitarian, 4.369  28,350    29,045    Cost of salaries  24,700    21,781    Common Staff Costs  6,020    6,020    Duty Travel  200,000    600,000    Supplies and Equipment  720        720    Common Services  3,000        3,000    Fellowships		P5 P4 P4 P4 P4 P3 P2
						3	3	3	307,717	262,790	660,566	Estimated Government Contribution		
4	4	3	72,777	99,905	68,580	4	4	4	333,416	285,907	687,940	TOTAL - MEXICO		

WORLD HEALTH ORGANIZATION											T O T A L S						
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				1,400	1,400												
				1,800	1,800												
				1,000	1,000												
					2,000												
			4,200	4,200	6,200										4,200	4,200	6,200
1	1	1		9,255	9,491												
				7,472	5,427												
				1,425	1,425												
										2,500	2,500						
1	1	1	16,471	18,152	16,343				2,500	2,500	2,500	1	1	1	18,971	20,652	18,843
															(250,000)	(250,000)	(250,000)
												1	1	1	25,699	23,117	27,374
						1	1	1		12,119	12,403						
						1	1	1		11,253	11,420						
						1	1	1		10,715	10,975						
						1	1	1		6,895	7,076						
										40,982	41,874						
										25,386	22,231						
										6,316	6,316						
						4	4	4	71,422	72,684	70,421	7	7	7	379,139	335,474	730,987
															(5,000,000)	(5,000,000)	(5,000,000)
7	7	7	121,384	132,470	149,933	4	4	4	73,922	79,784	77,521	19	19	18	601,499	598,066	983,974



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		11,018	11,274												
				6,988	8,309												
				3,000	3,000												
				200	200												
1	1	1	22,974	21,206	22,783							1	1	1	22,974	21,206	22,783
												1	1		13,398	13,505	9,895
1	1	1		9,250	9,517												
				5,918	3,927												
				3,000	3,000												
				100	100												
1	1	1	17,614	18,268	16,544							1	1	1	17,614	18,268	16,544
												1		2	17,536		21,016
												1	1	1	21,302	19,746	21,406

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE II		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	AMRO-205, Sanitary Engineering (Zone II) (For text see page 57)		
	1	1		2,376	2,472							Sanitary Engineer, 4.303 Clerk Stenographer, .2042		P4 ML5
				430	448							Common Staff Costs		
												Duty Travel		
										3,000		Supplies and Equipment		
				8,600	4,300					4,000	9,000	Fellowships		
	1	1		11,406	7,220					7,000	9,000			
												AMRO-290, Nursing (Zone II) (For text see page 58)		
	1	1		9,794	10,043							Nurse, .304 Clerk Stenographer, .309		P4 ML5
	1	1		2,824	2,920							Cost of salaries		
				12,618	12,963							Common Staff Costs		
				5,493	4,938							Duty Travel		
				2,800	2,800							Supplies and Equipment		
				100	100									
	2	2		21,011	20,801									
												AMRO-313, Medical Education (Zone II) (For text see page 58)		
	1			6,698								Professional Educator, .2043		P4
				5,700								Common Staff Costs		
				3,000								Duty Travel		
	1			15,398										
												AMRO-314, Planning (Zone II) (For text see page 58)		
				2,800	2,800							Short-term Consultants Fees		
				3,600	3,600							Travel		
					6,300							Fellowships		
			898	6,400	12,700									
2	5	6	39,736	73,961	83,143	1	1		13,398	20,505	18,895	TOTAL - INTERCOUNTRY PROGRAMS		
21	21	21	399,228	415,475	399,335	18	19	18	556,694	556,808	958,988	TOTAL - ZONE II PROGRAMS		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
	1	1		10,867	11,127												
				10,837	5,639												
				2,380	2,380												
				100	100												
					8,600												
	1	1	8,600	24,184	27,846								2	2	8,600	42,590	44,066
													2	2		21,011	20,801
													1			15,398	
															898	6,400	12,700
2	3	3	49,188	63,658	67,173							5	9	9	102,322	158,124	169,211
18	22	22	305,040	393,191	430,556	13	15	15	200,948	252,500	260,176	70	77	76	1,461,910	1,617,974	2,049,055

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - GUATEMALA CITY</u> (For text see page 39)		
1	1	1		14,140	14,140								Zone Representative, .400	D1
1	1	1		12,117	12,405								Assistant Zone Representative, .401	P5
													Sanitary Engineer, 4.402	P4
1	1	1		11,420	11,420								Nurse, .405	P4
1	1	1		6,969	7,157								Administrative Officer, .407	P4
1	1	1		4,561	4,751								Accounts and Budget Officer, .409	P2
													Accountant, .457	GL8
1	1	1		4,460	4,460								Records and Communications Clerk, .410	GL7
1	1	1		4,038	4,213								Personnel Clerk, .458	GL7
1	1	1		3,935	4,110								General Services Clerk, .414	GL7
3	3	3		9,181	9,601								Accounting Clerk, .439, .3005, .3011	GL6
													Secretary, .411, .415, .454, 9020, 9256	GL6
3	1	1		3,585	3,620	2	1	1		3,294	3,434		Travel Clerk, .412	GL5
1	1	1		2,380	2,510								Clerk Stenographer, .413	GL4
													Clerk, .416	GL3
1	1	1		1,575	1,660								Chauffeur, .3006	GL2
1	1	1		1,615	1,615								Janitor-Messenger, .417	GL2
1	1	1		1,426	1,491								Estimated Local Wage Increases	
				1,500										
				82,902	83,153									Cost of salaries
				32,601	35,024									Common Staff Costs
				115,503	118,177									Cost of Staff
				7,712	7,712									Duty Travel
				300	300									Hospitality
														Common Services
				6,273	6,273									Space and Equipment Services
				9,000	9,000									Other Services
				2,970	2,970									Supplies and Materials
				680	680									Fixed Charges and Claims
				1,750	1,784									Acquisition of Capital Assets
20	16	16	168,724	144,188	146,896	2	1	1	6,637	3,663	3,819	TOTAL		
												<u>BRITISH HONDURAS</u>		
												<u>BRITISH HONDURAS-1, Malaria Eradication</u> (For text see page 59)		
						1	1	1		9,315	9,548		Medical Officer, 9259	P4
						1	1			6,953			Sanitarian, 9210	P2
										16,268	9,548		Cost of salaries	
										7,343	5,446		Common Staff Costs	
										7,583	3,383		Duty Travel	
										900	900		Supplies and Equipment	
						2	2	1	58,660	32,094	19,277	Estimated Government Contribution		





PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE III	GRADE	
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
												<u>BRITISH HONDURAS-5, Health Services</u> (For text see page 59)		
												Sanitary Engineer, 4.3510 Public Health Nurse, 4.3509		P4 P3
												Cost of salaries Common Staff Costs Duty Travel Fellowships		
												<u>BRITISH HONDURAS-6, PAHO Fellowships</u> <u>for Health Services</u> (For text see page 59)		
			4,300	4,300	4,300							Fellowships		
												<u>BRITISH HONDURAS-7, Promotion of</u> <u>Community Water Supplies</u> (For text see page 59)		
								1	1	6,698	9,114	Sanitary Engineer, 9433		P4
										4,945	4,362	Common Staff Costs Short-term Consultants Fees Travel		
										1,750	1,750	Duty Travel		
										2,250	2,250			
										2,000	2,000			
								1	1					
										17,643	19,476			
			4,300	4,300	4,300	2	3	2	58,660	49,737	38,753	TOTAL - BRITISH HONDURAS		
												<u>COSTA RICA</u>		
												<u>COSTA RICA-2, Malaria Eradication</u> (For text see page 59)		
						1	1	1	10,217	10,477		Medical Officer, 9035 Entomologist, 9307 Sanitarian, 9034 Sanitarian, 9214		P4 P3 P2 P1
						1	1	1	8,421					
						1	1	1	5,563	6,753				
						1	1	1	5,220	5,410				
									30,421	22,640		Cost of salaries		
									27,677	13,138		Common Staff Costs		
									12,900	8,700		Duty Travel		
									20,000	20,000		Supplies and Equipment		
									600	600		Fellowships		
						4	4	3	72,690	91,598	65,078			
												Estimated Government Contribution		

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

62			63			64			1962			1963			1964		
62			63			64			1962			1963			1964		
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		9,114	9,355												
1	1	1		7,618	7,828												
				16,732	17,183												
				7,435	8,721												
				2,000	2,000												
					4,300												
2	2	2	9,601	26,167	32,204							2	2	2	9,601	26,167	32,204
															4,300	4,300	4,300
													1	1		17,643	19,476
2	2	2	9,601	26,167	32,204							4	5	4	72,561	80,204	75,257
												4	4	3	72,690	91,598	65,078
															(246,913)	(246,913)	(246,913)

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE III	GRADE	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
1	1	1		9,114	9,355							COSTA RICA-14, National Health Services (For text see page 60)	P4
				3,829	4,408							Medical Officer, .3015	
				500	500							Common Staff Costs	
				4,300	8,600							Duty Travel	
												Fellowships	
1	1	1	12,069	17,743	22,863								
1	1	1		7,618	7,828							COSTA RICA-18, Advanced Nursing Education (For text see page 60)	P3
				3,540	4,113							Nurse Educator, .3007	
				500	500							Common Staff Costs	
				550	550							Duty Travel	
				4,300	4,300							Supplies and Equipment	
				4,500								Fellowships	
												Participants	
1	1	1	8,264	21,008	17,291							Estimated Government Contribution	
												COSTA RICA-22, Promotion of Community Water Supplies (For text see page 60)	P4
							1	1	6,698	9,114		Sanitary Engineer, 9401	
									4,945	4,362		Common Staff Costs	
									1,400	1,400		Short-term Consultants Fees	
									1,800	1,800		Travel	
									2,000	2,000		Duty Travel	
							1	1	12,090	16,843	18,676		
												COSTA RICA-24, Laboratory for Diagnosis of Viral Diseases (For text see page 60)	
												Short-term Consultants Fees	
												Travel	
												Fellowships	
												COSTA RICA-201, WHO/TA Fellowships for Health Services (For text see page 60)	
												Fellowships	
2	2	2	20,333	38,751	40,154	4	5	4	84,780	108,441	83,754	TOTAL - COSTA RICA	

WORLD HEALTH ORGANIZATION											T O T A L S						
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	12,069	17,743	22,863
												1	1	1	8,264	21,008	17,291
															(50,800)	(50,800)	(50,800)
													1	1	12,090	16,843	18,676
				1,400	1,400												
				1,800	1,800												
				4,300	4,300												
			3,200	7,500	7,500										3,200	7,500	7,500
									5,315	4,300	4,300				5,315	4,300	4,300
			3,200	7,500	7,500				5,315	4,300	4,300	6	7	6	113,628	158,992	135,708

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>EL SALVADOR</u>		
												<u>EL SALVADOR-2, Malaria Eradication</u> (For text see page 61)		
						1	2	2		16,093	18,741	Medical Officer, 9023, 9423		P4
						1	1	1		9,737	9,979	Sanitary Engineer, 9216		P4
						1	1	1		7,618	7,828	Entomologist, 9308		P3
						2	2	2		12,408	12,782	Sanitarian, 9121, 9215		P2
						1	1	1		5,454	5,639	Entomological Aide, 9285		P1
										51,310	54,969	Cost of salaries		
										45,580	38,144	Common Staff Costs		
										16,600	19,600	Duty Travel		
										100,000	100,000	Supplies and Equipment		
										4,300	4,300	Fellowships		
						6	7	7	99,945	217,790	217,013	Estimated Government Contribution		
												<u>EL SALVADOR-9, PAHO Fellowships</u> <u>for Health Services</u> (For text see page 61)		
			4,300	4,300	8,600							Fellowships		
												<u>EL SALVADOR-11, National Public Health</u> <u>Nursing Services</u> (For text see page 61)		
												Public Health Nurse, 4.3514		P4
												<u>EL SALVADOR-12, National Environmental</u> <u>Sanitation Services</u> (For text see page 61)		
												All Purposes		
												<u>EL SALVADOR-14, Promotion of</u> <u>Community Water Supplies</u> (For text see page 61)		
							1	1		6,698	9,114	Sanitary Engineer, 9435		P4
										6,133	5,982	Common Staff Costs		
										1,400	1,400	Short-term Consultants		
										1,800	1,800	Fees		
												Travel		
										2,000	2,000	Duty Travel		
							1	1	1/19,220	18,031	20,296			
												<u>EL SALVADOR-15, Public Health</u> <u>Laboratory</u> (For text see page 61)		
												Medical Officer, 4.3517		P4
												Common Staff Costs		
												Fellowships		

<sup>1/</sup> Includes \$14,400 from Community Water Supply Fund and \$4,820 from Inter-American Development Bank.

WORLD HEALTH ORGANIZATION												TOTALS					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												6	7	7	99,945	217,790	217,013
															(708,930)	(708,930)	(708,930)
															4,300	4,300	8,600
						1			12,235			1			12,235		
						1			16,559			1			16,559		
												1	1		19,220	18,031	20,296
1	1	1		9,114	9,355												
				5,518	6,214												
				4,300	4,300												
1	1	1	9,950	18,932	19,869							1	1	1	9,950	18,932	19,869

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	EL SALVADOR-19, National Health Services (For text see page 62)		
	1	1		6,698	9,114							Medical Officer, .3021 Sanitary Engineer, 4.3521 Public Health Nurse, 4.3522		P4 P4 P3
				6,698	9,114							Cost of salaries		
				6,133	5,946							Common Staff Costs		
				1,000	1,000							Duty Travel		
												Supplies and Equipment		
												Fellowships		
	1	1		13,831	16,060									
	1	1	4,300	18,131	24,660	6	8	8	119,165	235,821	237,309	TOTAL - EL SALVADOR		
GUATEMALA														
<u>GUATEMALA-1, Malaria Eradication</u> (For text see page 62)														
						2	2	2	20,152	20,672	20,672	Medical Officer, 9130, 9360		P4
						1	1	1	9,870	10,130	10,130	Sanitary Engineer, 9255		P4
						2	2	2	13,095	13,470	13,470	Sanitarian, 9043, 9260		P2
						1	1		5,391			Sanitarian, 9217		P1
									48,508	44,272	44,272	Cost of salaries		
									40,294	31,089	31,089	Common Staff Costs		
									16,532	13,032	13,032	Duty Travel		
									50,000	30,000	30,000	Supplies and Equipment		
						6	6	5	109,954	155,334	118,393			
Estimated Government Contribution														
<u>GUATEMALA-6, Nursing Education</u> (For text see page 62)														
												Nurse Educator, 4.453, 4.3512		P3
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
			5,800											
Estimated Government Contribution														
<u>GUATEMALA-8, National Health Services</u> (For text see page 62)														
												Chief Country Adviser, 4.442		P5
												Sanitary Engineer, 4.447		P4
												Nurse, 4.456		P3
												Sanitarian, 4.3502		P2
												Cost of salaries		





PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS  ZONE III	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	GUATEMALA-8, (continued)	
												Common Staff Costs	
												Duty Travel	
												Supplies and Equipment	
												Fellowships	
												Estimated Government Contribution	
												<u>GUATEMALA-11, Tuberculosis Control</u> (For text see page 63)	
												Medical Officer, 4.461 Bacteriologist, 4.3524	P4 P4
												Cost of salaries	
												Common Staff Costs	
												Duty Travel	
												Supplies and Equipment	
												Fellowships	
												Estimated Government Contribution	
												<u>GUATEMALA-12, PAHO Fellowships for Health Services</u> (For text see page 63)	
			4,300	8,600	8,600							Fellowships	
												<u>GUATEMALA-14, Public Health in Schools of Veterinary Medicine</u> (For text see page 63)	
				1,400	1,400							Short-term Consultants	
				1,800	1,800							Fees	
				4,300	4,300							Travel	
												Fellowships	
			7,160	7,500	7,500								
												<u>GUATEMALA-17, Promotion of Community Water Supplies</u> (For text see page 63)	
										3,500	3,500	Short-term Consultants	
										4,500	4,500	Fees	
												Travel	
									8,000	8,000	8,000		
												<u>GUATEMALA-19, Public Health Legislation</u> (For text see page 63)	
												All Purposes	
			17,260	16,100	16,100	6	6	5	117,954	163,334	126,393	TOTAL - GUATEMALA	

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962 1963 1964			62 63 64			1962 1963 1964			62 63 64			1962 1963 1964		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				27,945	24,978												
				2,150	2,150												
				3,350	2,000												
					4,300												
4	4	4	70,020	70,937	71,866							4	4	4	70,020	70,937	71,866
															(2,015,000)	(2,430,000)	(2,745,000)
						1	1	1		9,260	9,493						
							1			6,698							
										15,958	9,493						
										11,482	5,029						
										3,600	2,000						
										450	450						
										4,300	4,300						
						1	2	1	15,424	35,790	21,272	1	2	1	15,424	35,790	21,272
															(226,460)	(326,800)	(326,800)
															4,300	8,600	8,600
															7,160	7,500	7,500
															8,000	8,000	8,000
			3,200												3,200		
4	4	4	73,220	70,937	71,866	3	4	3	40,292	73,837	52,611	13	14	12	248,726	324,208	266,970

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS		GRADE
REGULAR BUDGET						OTHER FUNDS						ZONE III		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
												<u>HONDURAS</u>		
												<u>HONDURAS-1, Malaria Eradication</u> (For text see page 64)		
							1	1		9,794	10,044	Medical Officer, 9218		P4
							1	1		9,851	10,108	Sanitary Engineer, 9082		P4
							1	1		7,618	7,828	Entomologist, 9306		P3
							2	2		10,673	11,052	Sanitarian, 9219, 9220		P1
										37,936	39,032	Cost of salaries		
										31,497	26,849	Common Staff Costs		
										12,852	13,852	Duty Travel		
										70,000	70,000	Supplies and Equipment		
										2,000		Fellowships		
						5	5	5	83,363	154,285	149,733	Estimated Government Contribution		
												<u>HONDURAS-4, National Health Services</u> (For text see page 64)		
												Chief Country Adviser, 4.450		P5
												Sanitary Engineer, 4.451		P4
												Nurse, 4.452		P3
												Sanitarian, .3020, 4.3525		P2
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>HONDURAS-6, PAHO Fellowships for Health Services</u> (For text see page 64)		
			4,300	8,600	8,600							Fellowships		
												<u>HONDURAS-9, Promotion of Community Water Supplies</u> (For text see page 64)		
							1	1		6,698	9,114	Sanitary Engineer, 9436		P4
										5,836	5,577	Common Staff Costs		
										1,750	1,750	Short-term Consultants Fees		
										2,250	2,250	Travel		
										2,000	2,000	Duty Travel		
							1	1	14,400	18,534	20,691			
												<u>HONDURAS-10, Port City Development</u> (For text see page 64)		
												All Purposes		

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												5	5	5	83,363	154,285	149,733
															(722,917)	(722,917)	(722,917)
						1	1	1	11,480		11,732						
						1	1	1	9,400		9,622						
						1	1	1	7,985		8,195						
							1	1	7,618		7,828						
									36,483		37,377						
									24,399		20,662						
									2,400		2,400						
									4,300		4,300						
						3	4	4	48,023	67,582	64,739	4	4	4	63,283	67,582	64,739
															(1,034,143)	(1,023,348)	(1,023,348)
															4,300	8,600	8,600
													1	1	14,400	18,534	20,691
									22,400						22,400		

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE III	GRADE		
REGULAR BUDGET					OTHER FUNDS									
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
												<u>HONDURAS-12, Public Health Legislation</u> (For text see page 64)  All Purposes		
1			19,560	8,600	8,600	5	6	6	97,763	172,819	170,424	TOTAL - HONDURAS		
												<u>NICARAGUA</u>  <u>NICARAGUA-1, Malaria Eradication</u> (For text see page 64)		
						1	2	2	16,092	18,741		Medical Officer, 9053, 9430 Sanitary Engineer, 9054 Sanitarian, 9190, 9221 Entomological Aide, 9288		P4 P4 P2 P1
						1	1	1	10,066	10,325				
						2	2	2	13,438	13,815				
						1	1	1	5,548	5,735				
									45,144	48,616		Cost of salaries		
									39,245	32,799		Common Staff Costs		
									14,628	14,628		Duty Travel		
									100,000	100,000		Supplies and Equipment		
						5	6	6	83,616	199,017	196,043	Estimated Government Contribution		
												<u>NICARAGUA-5, Nursing Education</u> (For text see page 65)		
												Nurse Educator, 4.448, 4.449		P3
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												<u>NICARAGUA-7, PAHO Fellowships for Health Services</u> (For text see page 65)		
			4,300	8,600	8,600							Fellowships		
												<u>NICARAGUA-10, Promotion of Community Water Supplies</u> (For text see page 65)		
						1	1		6,698	9,114		Sanitary Engineer, 9437		P4
									6,430	6,387		Common Staff Costs		
									1,750	1,750		Short-term Consultants Fees		
									2,250	2,250		Travel		
									2,000	2,000		Duty Travel		
						1	1		19,128	21,501				

WORLD HEALTH ORGANIZATION

TOTALS

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			3,200												3,200		
			3,200			3	4	4	70,423	67,582	64,739	9	10	10	190,946	249,001	243,763
												5	6	6	83,616	199,017	196,043
															(615,729)	(615,729)	(615,729)
2	2	1		16,374	8,971												
				10,358	3,808												
				1,465	771												
				1,075	1,000												
				4,300	4,300												
2	2	1	32,070	33,572	18,850							2	2	1	32,070	33,572	18,850
															(171,000)	(166,000)	(166,000)
															4,300	8,600	8,600
													1	1		19,128	21,501

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE III	GRADE		
REGULAR BUDGET						OTHER FUNDS									
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE						
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964				
			\$	\$	\$				\$	\$	\$				
					4,200									NICARAGUA-13, Medical Education (For text see page 65)	
					5,400									Short-term Consultants	
														Fees	
					3,000									Travel	
					2,300									Supplies and Equipment	
														Fellowships	
					14,900										
			4,300	8,600	23,500	5	7	7	83,616	218,145	217,544			TOTAL - NICARAGUA	
														<u>PANAMA</u>	
														<u>PANAMA-1, National Health Services</u> (For text see page 65)	
														Chief Country Adviser, 4.432	P5
														Sanitary Engineer, 4.433	P4
														Hospital Administrator, .3018	P4
														Public Health Veterinarian, 4.3516	P4
														Cost of salaries	
														Common Staff Costs	
														Duty Travel	
														Supplies and Equipment	
														Fellowships	
1			10,276											Estimated Government Contribution	
														<u>PANAMA-2, Malaria Eradication</u> (For text see page 66)	
						1	1	1	10,390	10,650				Medical Officer, 9222	P4
						1	1	1	9,114	9,355				Sanitary Engineer, 9056	P4
						1	1	1	7,846	8,056				Entomologist, 9309	P3
						1	1	1	6,953	7,141				Sanitarian, 9223	P2
						1	1	1	5,610	5,798				Sanitarian, 9224	P1
									39,913	41,000				Cost of salaries	
									19,761	22,208				Common Staff Costs	
									12,543	13,543				Duty Travel	
									8,140	8,140				Supplies and Equipment	
									8,600	8,600				Fellowships	
						5	5	5	89,422	88,957	93,491			Estimated Government Contribution	
														<u>PANAMA-8, PAHO Fellowships for Health Services</u> (For text see page 66)	
			4,300	4,300	8,600									Fellowships	



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
																	14,900
2	2	1	32,070	33,572	18,850							7	9	8	119,986	260,317	259,894
						1	1	1	11,440	11,684							
						1	1	1	9,118	9,360							
						1	1	1	9,420	9,640							
									29,978	30,684							
									22,013	18,473							
									3,300	3,300							
									200	200							
									4,300	4,300							
						3	3	3	45,560	59,791	56,957	4	3	3	55,836	59,791	56,957
															(8,909,219)	(9,047,184)	(9,181,149)
												5	5	5	89,422	88,957	93,491
															(585,000)	(585,000)	(585,000)
															4,300	4,300	8,600

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>PANAMA-9, Promotion of Community Water Supplies</u> (For text see page 66)		
							1	1		6,698	9,114	Sanitary Engineer, 9438		P4
										6,430	6,387	Common Staff Costs		
										1,750	1,750	Short-term Consultants Fees		
										2,250	2,250	Travel		
										2,000	2,000	Duty Travel		
							1	1	8,000	19,128	21,501			
												<u>PANAMA-10, Planning and Organization of Hospital Services</u> (For text see page 66)		
	1	1		9,114	9,355							Medical Officer, .3018		P4
				4,657	5,261							Common Staff Costs		
				800	800							Duty Travel		
	1	1		14,571	15,416									
1	1	1	14,576	18,871	24,016	5	6	6	97,422	108,085	114,992	TOTAL - PANAMA		
												<u>INTERCOUNTRY PROGRAMS</u>		
												<u>AMRO-13, Seminar on Sanitary Engineering (Zone III)</u> (For text see page 66)		
												Participants		
												<u>AMRO-54, Institute of Nutrition of Central America and Panama</u> (For text see page 67)		
1	1	1		11,018	11,274							Director, .946		P5
1	1	1		9,138	9,380							Medical Officer, .438		P4
	1	1		8,090	8,300							Nutrition Educator, .7055		P3
2	2	2		10,842	11,224							Editorial Assistant, .997, .7135		P1
				39,088	40,178							Cost of salaries		
				20,586	23,555							Common Staff Costs		
				7,000	7,000							Short-term Consultants Fees		
				9,000	9,000							Travel		
				11,020	11,020							Duty Travel		
				300	300							Hospitality		
				4,500	4,500							<u>Technical Advisory Committee</u>		
												Travel of Consultants		
				2,000	2,000							<u>Meeting of the Council</u>		
				1,000	1,000							Travel and Transportation Supplies and Materials		



PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	AMRO-54, (continued)		
						16	16	16	1/105,000	1/105,000	1/105,000	INCAP Operations - Financed by Member Governments		
						117	124	124	2/523,767	2/692,620	2/723,231	INCAP Projects - Financed from Contributions and Grants		
4	5	5	63,463	94,494	98,553	133	140	140	628,767	797,620	828,231			
												AMRO-86, Health Statistics (Zone III) (For text see page 67)		
												Health Statistician, 4.1016		P4
												Common Staff Costs		
												Duty Travel		
												AMRO-118, Malaria Technical Advisory Services (Zone III) (For text see page 67)		
						1	1	1		11,948	12,236	Chief Zone Malaria Adviser, 9018		P5
						1	1	1		9,114	9,355	Administrative Methods Officer, 9039		P4
						1						Entomological Aide, 9189		P1
						1	1	1		3,294	3,434	Secretary, 9175		GL6
										24,356	25,025	Cost of salaries		
										10,417	12,476	Common Staff Costs		
										6,637	8,637	Duty Travel		
										1,200	1,200	Supplies and Equipment		
						4	3	3	50,664	42,610	47,338			
												AMRO-148, Laboratory for Production of Biologicals (Zone III) (For text see page 67)		
	1	1		6,698	9,114							Medical Officer, .3010		P4
				7,160	6,018							Common Staff Costs		
				1,600	2,000							Duty Travel		
				2,000	4,000							Supplies and Equipment		
				4,300	4,300							Fellowships		
	1	1	17,300	21,758	25,432									
												Estimated Government Contribution		

1/ Contribution by Member Governments of INCAP.  
2/ Estimated contributions from various Organizations.

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												137	145	145	692,230	892,114	926,784
1	1	1		7,618	7,828												
				4,984	5,673												
				3,000	3,000												
1	1	1	21,813	15,602	16,501							1	1	1	21,813	15,602	16,501
												4	3	3	50,664	42,610	47,338
													1	1	17,300	21,758	25,432
															(120,000)	(120,000)	(120,000)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-188, Veterinary Public Health (Zone III)</u> (For text see page 67)  Public Health Veterinarian, 4.3513  Common Staff Costs  Duty Travel  Supplies and Equipment  Fellowships  Participants		P4
1	1			9,603								<u>AMRO-202, Leprosy Control (Zone III)</u> (For text see page 68)  Medical Officer, .3012  Common Staff Costs  Duty Travel		P4
1	1		16,191	18,720										
1	1	1		9,892	10,152							<u>AMRO-203, Epidemiology (Zone III)</u> (For text see page 68)  Epidemiologist, .3013  Common Staff Costs  Duty Travel  Supplies and Equipment		P4
				7,982	13,188									
				3,000	3,000									
				100	100									
1	1	1	22,561	20,974	26,440									
												<u>AMRO-206, Sanitary Engineering (Zone III)</u> (For text see page 68)  Sanitary Engineer, 4.402 Secretary, .415  Common Staff Costs  Duty Travel  Supplies and Equipment  Fellowships		P4 GL6
	1	1		3,422	3,564									
				599	625									
										3,000				
				12,900	6,573					4,000	9,000			
	1	1		16,921	10,762					7,000	9,000			
1	1	1		9,114	9,355							<u>AMRO-237, Medical Education (Zone III)</u> (For text see page 68)  Professional Educator, .3019  Common Staff Costs  Duty Travel  Fellowships		P4
				5,485	6,114									
				3,000	3,000									
				8,600	8,600									
1	1	1	17,383	*26,199	*27,069									

\*Special Fund for Health Promotion (See Annex 4).

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		10,217	10,477												
				7,882	5,804												
				3,000	3,000												
				500	600												
					8,600												
					2,000												
1	1	1	19,201	21,599	30,481							1	1	1	19,201	21,599	30,481
												1	1		16,191	18,720	
												1	1	1	22,561	20,974	26,440
	1	1		11,420	11,420												
				8,858	7,958												
				3,000	3,000												
					6,327												
	1	1	12,900	23,278	28,705								2	2	12,900	47,199	48,467
												1	1	1	17,383	26,199	27,069

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE III		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
1	1	1		9,114	9,355							<u>AMRO-246, Tuberculosis Control (Zone III)</u> (For text see page 68) Medical Officer, .3017 Common Staff Costs Duty Travel		P4
1	1	1	9,783	16,599	17,469									
	1	1		6,698	9,114							<u>AMRO-253, Administrative Methods and Practices in Public Health (Zone III)</u> (For text see page 69) Administrative Methods Consultant, .3022 Common Staff Costs Duty Travel		P4
	1	1		6,160	6,018									
				1,833	3,000									
	1	1		14,691	18,132									
	1	1		9,605	9,832							<u>AMRO-291, Nursing (Zone III)</u> (For text see page 69) Nurse, .3023 Secretary, .3024 Cost of salaries Common Staff Costs Duty Travel		P4 GL6
	1	1		3,562	3,620									
				13,167	13,452									
				5,905	4,666									
				2,480	2,550									
	2	2		21,552	20,668									
1	1	1		9,548	9,775							<u>AMRO-303, Medical Care (Zone III)</u> (For text see page 69) Medical Officer, .3016 Common Staff Costs Duty Travel		P4
				6,293	6,358									
				2,000	2,000									
1	1	1	21,494	17,841	18,133									
												<u>AMRO-325, Planning (Zone III)</u> (For text see page 69) Short-term Consultants Fees Travel Fellowships		
					2,800									
					3,600									
					6,300									
					12,700									
9	15	14	168,175	269,749	275,358	137	143	143	679,431	847,230	884,569	TOTAL - INTERCOUNTRY PROGRAMS		
13	19	18	252,804	383,102	416,688	170	184	181	1,338,791	1,903,612	1,873,738	TOTAL - ZONE III PROGRAMS		



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	9,783	16,599	17,469
												1	1			14,691	18,132
												2	2			21,552	20,668
												1	1	1	21,494	17,841	18,133
																	12,700
2	3	3	53,914	60,479	78,987							148	161	160	901,520	1,177,458	1,238,914
11	12	11	185,155	217,587	229,276	11	13	12	190,384	241,968	214,462	205	228	222	1,967,134	2,746,269	2,734,164

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE IV		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	ZONE OFFICE - LIMA (For text see page 39)		
1	1	1		12,675	13,095							Zone Representative, .600 D1		
1	1	1		10,845	11,105							Assistant Zone Representative, .601 P5		
1	1	1		9,159	9,400							Nurse, .606 P4		
1	1	1		6,265	6,452							Administrative Officer, .608 P4		
2	2	2		5,162	5,383							Accounts and Budget Officer, .609 P2		
1	1	1		3,097	3,097							Accounting Clerk, .654, .4003 LL5		
1	1	1		2,692	2,802							Secretary, .610 LL5		
3	1	1		2,630	2,630	1						Clerk (Personnel and Travel), .613 LL5		
1	1	1		2,630	2,630							Clerk Stenographer, .611, .612, .615, 9024 LL4		
1	1	1		2,491	2,589							File Clerk, .616 LL4		
1	1	1		1,856	1,930							Clerk, .614 LL4		
1	1	1		1,299	1,348							Clerk, .4009 LL3		
1	1	1		885	922							Chauffeur, .617 LL2		
												Messenger, .619 LL1		
				61,686	63,383							Cost of salaries		
				22,731	27,072							Common Staff Costs		
				84,417	90,455							Cost of Staff		
				5,400	5,400							Duty Travel		
				300	300							Hospitality		
				4,003	4,003							Common Services		
				11,802	12,302							Space and Equipment Services		
				2,541	2,541							Other Services		
				283	283							Supplies and Materials		
				525	3,025							Fixed Charges and Claims		
												Acquisition of Capital Assets		
17	14	14	131,854	109,271	118,309	1			2,227			TOTAL		
												BOLIVIA		
												BOLIVIA-4, Malaria Eradication (For text see page 70)		
						1						Chief Country Malaria Adviser, 4.655 P5		
						1	1	1	9,717	9,957		Medical Officer, 9279 P4		
						3	3	3	20,235	20,793		Sanitary Engineer, 9045 P4		
						1	1	1	4,950	5,142		Sanitarian, 9025, 9031, 9191 P2		
												Sanitarian, 9042 P1		
									34,902	35,892		Cost of salaries		
									13,490	19,751		Common Staff Costs		
									14,300	14,300		Duty Travel		
									5,000	5,000		Supplies and Equipment		
						6	5	5	96,929	67,692	74,943	Estimated Government Contribution		



PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE IV	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	<u>BOLIVIA-5, Nursing Education</u> (For text see page 70)	
												Nurse Educator, 4.651	P3
												Common Staff Costs	
												Duty Travel	
												Supplies and Equipment	
												Fellowships	
												Estimated Government Contribution	
												<u>BOLIVIA-10, National Health Services</u> (For text see page 70)	
1	1	1		9,180	9,420							Chief Country Adviser, .661	P5
1	1	1		9,260	9,493							Sanitary Engineer, .4013	P4
1	1	1		7,653	7,863							Public Health Nurse, .4014, 4.4528	P3
				26,093	26,776							Cost of salaries	
				15,114	13,552							Common Staff Costs	
				4,428	4,428							Duty Travel	
				4,300	4,300							Fellowships	
3	3	3	48,381	49,935	49,056							Estimated Government Contribution	
												<u>BOLIVIA-11, Joint Field Mission on Indigenous Populations</u> (For text see page 70)	
												Medical Officer, 4.1022	P4
												Common Staff Costs	
												Duty Travel	
												Fellowships	
												Estimated Government Contribution	
												<u>BOLIVIA-15, Promotion of Community Water Supplies</u> (For text see page 70)	
						1	1	1		9,055	9,300	Sanitary Engineer, 9363	P4
										3,549	4,695	Common Staff Costs	
										1,400	1,400	Short-term Consultants Fees	
										1,800	1,800	Travel	
										1,560	1,560	Duty Travel	
						1	1	1	16,487	17,364	18,755		

## WORLD HEALTH ORGANIZATION

## TOTALS

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	
			\$	\$	\$				\$	\$	\$				\$	\$	\$	
1	1	1		8,195	8,405													
				3,383	4,222													
				375	375													
				2,000	2,000													
				4,300	4,300													
1	1	1	19,791	18,253	19,302							1	1	1	19,791	18,253	19,302	
															(21,008)	(21,008)	(21,008)	
							1	1										
									7,460	7,670								
									7,460	7,670								
									4,661	3,836								
									2,300	2,300								
									4,300	4,300								
							1	1	18,721	18,106		3	4	4	48,381	68,656	67,162	
															(4,426)	(4,426)	(4,426)	
							1	1	1	9,698	16,632							
										4,501	8,608							
										1,950	1,950							
											4,300							
							1	1	1	19,251	16,149	31,490	1	1	1	19,251	16,149	31,490
															(1,540)	(1,540)	(1,540)	
												1	1	1	16,487	17,364	18,755	

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE IV		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	BOLIVIA-17, Nutrition (For text see page 71)		
									1/6,983			All Purposes		
3	3	3	48,381	49,935	49,056	7	6	6	120,399	85,056	93,698	TOTAL - BOLIVIA		
												<u>COLOMBIA</u>		
												<u>COLOMBIA-4, National Health Services</u> (For text see page 71)		
												Chief Country Adviser, 4.666 Medical Officer, 4.683, 4.4517 Sanitary Engineer, 4.667, 4.4520 Statistician, 4.4512 Public Health Nurse, 4.621, 4.668		P5 P4 P4 P3 P3
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>COLOMBIA-5, Malaria Eradication</u> (For text see page 71)		
						1	1	1	11,253	11,500		Chief Country Malaria Adviser, 9183		P5
						1	1	1	10,108	10,368		Medical Officer, 9192		P4
						1	1	1	10,693	10,953		Sanitary Engineer, 9184		P4
						1	1	1	9,870	9,870		Statistician, 9181		P3
						1	1	1	7,618	7,828		Entomologist, 9310		P3
						3	3	3	19,299	19,859		Sanitarian, 9030, 9193, 9194		P2
						3	3	3	15,960	16,562		Sanitarian, 9032, 9033, 9058		P1
									84,801	86,940		Cost of salaries		
									44,872	44,653		Common Staff Costs		
									32,640	32,640		Duty Travel		
									20,000	20,000		Supplies and Equipment		
									12,900	12,900		Fellowships		
						11	11	11	200,934	195,213	197,133	Estimated Government Contribution		
												<u>COLOMBIA-19, Leprosy Control</u> (For text see page 71)		
												Medical Officer, 4.4504		P4
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62			1962			62			1962			62			1962		
63	64		1963	1964		63	64		1963	1964		63	64		1963	1964	
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															6,983		
1	1	1	19,791	18,253	19,302	2	3	3	33,781	53,153	69,258	13	13	13	222,352	206,397	231,314
						1	1	1		11,170	11,420						
						2	2	2		21,126	21,645						
						2	2	2		18,317	18,798						
						1	1	1		7,740	7,950						
						2	2	2		15,883	16,303						
										74,236	76,116						
										38,455	37,088						
										8,420	8,420						
										4,300	4,300						
						8	8	8	113,273	125,411	125,924	8	8	8	113,273	125,411	125,924
															(864,610)	(864,610)	(864,610)
												11	11	11	200,934	195,213	197,133
															(2,023,121)	(2,023,121)	(2,023,121)
						1	1	1		9,585	9,813						
										4,178	4,224						
										3,060	3,060						
											4,000						
						1	1	1	16,042	16,823	21,097	1	1	1	16,042	16,823	21,097
															(924,855)	(924,855)	(924,855)

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE IV			
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964				
			\$	\$	\$				\$	\$	\$	COLOMBIA-21 (PAHO), COLOMBIA-200 (WHO) <u>Fellowships for Health Services</u> (For text see page 71)			
			4,300	8,600	12,900							Fellowships			
												COLOMBIA-24, School of Public Health (For text see page 72)			
												Professor (P.H.A.), 4.4521 Nurse Educator, 4.4519		P4 P3	
				8,600								Cost of salaries			
				8,600								Common Staff Costs			
												Fellowships			
												COLOMBIA-25, Promotion of Community <u>Water Supplies</u> (For text see page 72)			
							1	1	1		9,475	9,698	Consultant on Water Supply, 9314		P4
											6,698	9,118	Sanitary Engineer, 9440		P4
											16,173	18,816	Cost of salaries		
											10,150	9,359	Common Staff Costs		
											6,060	6,060	Duty Travel		
							1	2	2	22,110	32,383	34,235			
													COLOMBIA-52, National Institute of <u>Health (Carlos Finlay)</u> (For text see page 72)		
			25,000	25,000	25,000								Cooperative Agreement		
													Estimated Government Contribution		
			29,300	42,200	37,900	12	13	13	223,044	227,596	231,368	TOTAL - COLOMBIA			
													ECUADOR		
													ECUADOR-4, National Health Services (For text see page 72)		
													Chief Country Adviser, 4.652 Medical Officer, 4.527 Sanitary Engineer, 4.526 Public Health Nurse, 4.678		P5 P4 P4 P3
													Cost of salaries		
													Common Staff Costs		
													Duty Travel		
													Fellowships		
													Estimated Government Contribution		



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			4,300												8,600	8,600	12,900
1	1	1		9,180	9,420												
1	1	1		7,618	7,828												
				16,798	17,248												
				7,145	9,085												
					8,600												
2	2	2	32,727	23,943	34,933							2	2	2	32,727	32,543	34,933
												1	2	2	22,110	32,383	34,235
															25,000	25,000	25,000
															(46,243)	(46,243)	(46,243)
2	2	2	37,027	23,943	34,933	9	9	9	129,315	142,234	147,021	23	24	24	418,686	435,973	451,222
1	1	1		6,728	6,728	1	1	1		10,910	11,170						
1	1	1		8,405	8,615												
				15,133	24,439					10,910	11,170						
				9,197	12,115					5,817	8,945						
				2,550	2,800					3,360	3,360						
				4,300	4,300					4,300	4,300						
1	2	3	12,874	31,180	43,654	1	1	1	17,030	24,387	27,775	2	3	4	29,904	55,567	71,429
															(7,500)	(7,500)	(7,500)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE IV		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	ECUADOR-11, National Institute of Health (For text see page 73)		
1				2,100	2,100							Laboratory Adviser, .4002		P4
				2,700	2,700							Short-term Consultants Fees Travel		
				8,600	8,600							Fellowships		
1			12,961	13,400	13,400							Estimated Government Contribution		
												ECUADOR-14, Malaria Eradication (For text see page 73)		
												Chief Country Malaria Adviser, 4.1127		P5
						1	1	1	9,935	10,195		Medical Officer, 9353		P4
						1	1	1	9,850	10,108		Sanitary Engineer, 9230		P4
						1	1	1	7,618	7,828		Entomologist, 9311		P3
						2	2	2	13,940	14,310		Sanitarian, 9120, 9195		P2
						2	2	2	11,034	11,405		Sanitarian, 9041, 9202		P1
									52,377	53,846		Cost of salaries		
									27,939	36,833		Common Staff Costs		
									20,090	20,090		Duty Travel		
									10,000	10,000		Supplies and Equipment		
									4,300	4,300		Fellowships		
						7	7	7	126,343	114,706	125,069	Estimated Government Contribution		
												ECUADOR-16, Nursing Education (For text see page 73)		
												Nurse Educator, 4.687		P3
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												ECUADOR-19, PAHO Fellowships for Health Services (For text see page 73)		
			4,300	4,300	4,300							Fellowships		
1	1	1		10,888	11,139							ECUADOR-20, Smallpox Eradication (For text see page 73)		
				4,791	4,982							Medical Officer, .4000 Sanitarian, 4.4522, 4.4523		P4 P1
				1,950	1,950							Common Staff Costs		
												Duty Travel		
1	1	1	23,583	17,629	18,071							Estimated Government Contribution		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1			12,961	13,400	13,400
															(271,429)	(271,429)	(271,429)
						1	1	1		11,480	11,733						
										11,480	11,733						
										6,925	7,851						
										1,200	1,200						
						1	1	1	19,960	19,605	20,784	8	8	8	146,303	134,311	145,853
															(365,238)	(365,238)	(365,238)
1	1	1		8,125	8,335												
				2,401	3,159												
				364	364												
				8,600	8,600												
1	1	1	17,815	19,490	20,458							1	1	1	17,815	19,490	20,458
															(16,190)	(16,190)	(16,190)
															4,300	4,300	4,300
						2	2			9,900							
										6,172							
										1,600							
						2	2		42,560	17,672		3	3	1	66,143	35,301	18,071
															(85,714)	(85,714)	

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS  ZONE IV	GRADE		
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
						1	1	1		9,055	9,300		ECUADOR-21, Promotion of Community Water Supplies (For text see page 73)	
										3,549	4,695		Sanitary Engineer, 9367	P4
										1,400	1,400		Common Staff Costs	
										1,800	1,800		Short-term Consultants Fees	
										1,560	1,560		Travel	
													Duty Travel	
						1	1	1	15,254	17,364	18,755			
													ECUADOR-23, Health Planning (For text see page 74)	
													Medical Officer, 4.4524	P4
													ECUADOR-53, National Institute of Nutrition (For text see page 74)	
									5,346	2,000			Supplies and Equipment	
									16,604	12,135			Contractual Services	
									8,000	8,000			Grant	
									1/29,950	2/22,135				
2	1	1	40,844	35,329	35,771	8	8	8	171,547	154,205	143,824		TOTAL - ECUADOR	
													PERU	
													PERU-5, Malaria Eradication (For text see page 74)	
						1	1	1		10,173	10,433		Chief Country Malaria Adviser, 4.4502	P5
						4	4	4		23,575	24,308		Sanitary Engineer, 9059 Sanitarian, 9060, 9061, 9062, 9196, 4.4503	P4 P2
										33,748	34,741		Cost of salaries	
										19,464	21,618		Common Staff Costs	
										17,280	17,280		Duty Travel	
										10,000	10,000		Supplies and Equipment	
										4,300	4,300		Fellowships	
						5	5	5	88,781	84,792	87,939			
													Estimated Government Contribution	
													PERU-15, Nursing Education (For text see page 74)	
													Nurse Educator, 4.4510	P3
													Common Staff Costs	
													Duty Travel	
													Fellowships	
													Estimated Government Contribution	

1/ Contribution from W. K. Kellogg Foundation,  
Williams Waterman Fund, United States Public  
Health Service - National Institutes of Health.

2/ Contribution from Williams Waterman Fund,  
United States Public Health Service -  
National Institutes of Health.

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	15,254	17,364	18,755
						1			12,800			1			12,800		
															29,950	22,135	
2	3	4	30,689	50,670	64,112	5	4	2	92,350	61,664	48,559	17	16	15	335,430	301,868	292,266
						1	1	1		11,950	12,240						
						1	1	1		7,076	7,268						
										19,026	19,508						
										8,824	9,032						
										3,264	3,264						
						2	2	2	34,159	31,114	31,804	7	7	7	122,940	115,906	119,743
															(822,430)	(822,430)	(822,430)
1	1	1		8,248	8,458												
				3,779	2,080												
				480	480												
				4,300	4,300												
1	1	1	18,064	16,807	15,318							1	1	1	18,064	16,807	15,318
															(2,991)	(2,991)	(2,991)

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS  ZONE IV	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	<u>PERU-22, National Health Services</u> (For text see page 74)	
												Chief Country Adviser, 4.681	P5
												Medical Officer, 4.4529	P4
												Sanitary Engineer, 4.685	P4
												Public Health Nurse, 4.682	P3
												Cost of salaries	
												Common Staff Costs	
												Duty Travel	
												Fellowships	
												Estimated Government Contribution	
												<u>PERU-23, Joint Field Mission on Indigenous Populations</u> (For text see page 74)	
												Duty Travel	
												<u>PERU-25, PAHO Fellowships for Health Services</u> (For text see page 75)	
			4,300	4,300	8,600							Fellowships	
												<u>PERU-30, Promotion of Community Water Supplies</u> (For text see page 75)	
						1	1	1	9,117	9,360		Fiscal and Accounting Specialist, 9388	P4
									3,560	4,707		Sanitary Engineer, 4.4516	P4
												Common Staff Costs	
									2,100	2,100		Short-term Consultants	
									2,700	2,700		Fees	
												Travel	
												Fellowships	
									2,280	2,280		Duty Travel	
						1	1	1	<sup>1/</sup> 18,722	19,757	21,147		
												<u>PERU-32, Infantile Diarrhea and Malnutrition</u> (For text see page 75)	
									40,866	40,604		Personal Services	
									2,500	2,500		Duty Travel	
									900	900		Supplies and Equipment	
									5,962	6,088		Contingencies	
									<sup>2/</sup> 49,190	<sup>2/</sup> 50,228	<sup>2/</sup> 50,092		
			4,300	4,300	8,600	6	6	6	156,693	154,777	159,178	TOTAL - PERU	

<sup>1/</sup> Includes \$4,800 grant from Inter-American Development Bank and \$13,922 from Community Water Supply Fund.

<sup>2/</sup> Contribution from United States Public Health Service - National Institutes of Health.

WORLD HEALTH ORGANIZATION											T O T A L S						
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						1	1	1		11,127	11,378						
						1	1	1		6,698	9,117						
						1	1	1		9,117	9,360						
						1	1	1		8,143	8,353						
										35,085	38,208						
										18,550	17,829						
										3,520	3,520						
										4,300	4,300						
						3	4	4	43,160	61,455	63,857	3	4	4	43,160	61,455	63,857
															(9,402)	(9,402)	(9,402)
									1,500	1,500	1,500				1,500	1,500	1,500
															4,300	4,300	8,600
						1	1	1		11,191	11,420						
										7,781	3,820						
										4,300	4,300						
										1,200	1,200						
						1	1	1	28,160	24,472	20,740	2	2	2	46,882	44,229	41,887
															49,190	50,228	50,092
1	1	1	18,064	16,807	15,318	6	7	7	106,979	118,541	117,901	13	14	14	286,036	294,425	300,997

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE IV			
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964				
			\$	\$	\$				\$	\$	\$				
												<u>INTERCOUNTRY PROGRAMS</u> <u>AMRO-119, Malaria Technical Advisory Services (Zone IV)</u> (For text see page 75)			
						1	1	1		10,672	10,932	Sanitary Engineer, 9091		P4	
												Administrative Methods Consultant, 9198		P4	
												Administrative Methods Officer, 9044		P3	
												Entomologist, 9092		P3	
										3,262	2,522	Common Staff Costs			
										3,750	3,750	Duty Travel			
						4	1	1	75,054	17,684	17,204				
												<u>AMRO-143, Health Statistics (Zone IV)</u> (For text see page 75)			
												Statistician, 4.1126		P4	
												Common Staff Costs			
												Duty Travel			
												<u>AMRO-179, Veterinary Public Health (Zone IV)</u> (For text see page 75)			
1	1	1		10,542	10,802							Public Health Veterinarian, .605		P4	
				5,343	6,595							Common Staff Costs			
				2,000	2,000							Duty Travel			
1	1	1	19,535	17,885	19,397										
												<u>AMRO-207, Sanitary Engineering (Zone IV)</u> (For text see page 75)			
	1	1		10,628	10,888							Sanitary Engineer, .602, 4.6522		P4	
	1	1		2,147	2,245							Clerk Stenographer, .615		LL4	
				12,775	13,133							Cost of salaries			
				6,296	4,807							Common Staff Costs			
				2,200	2,200							Duty Travel			
											3,000	Supplies and Equipment			
				12,000	12,000						4,000	9,000	Fellowships		
	2	2		33,271	32,140						7,000	9,000			
													<u>AMRO-262, Nutrition Advisory Services (Zone IV)</u> (For text see page 76)		
													Medical Nutritionist, 4.677		P4
												Common Staff Costs			
												Duty Travel			



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962	1963	1964	62 63 64			1962	1963	1964	62 63 64			1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												4	1	1	75,054	17,684	17,204
1	1	1		9,530	9,755												
				5,975	4,386												
				3,000	3,000												
1	1	1	16,865	18,505	17,141							1	1	1	16,865	18,505	17,141
												1	1	1	19,535	17,885	19,397
1																	
1			18,174									1	2	2	18,174	40,271	41,140
1	1	1		9,851	10,108												
				6,908	4,928												
				3,000	3,186												
1	1	1	17,662	19,759	18,222							1	1	1	17,662	19,759	18,222

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS		GRADE
REGULAR BUDGET						OTHER FUNDS						ZONE IV		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-263, Leprosy Control (Zone IV)</u> (For text see page 76)		
				1,400	1,400							Short-term Consultants Fees Travel		
			1,500	3,200	3,200									
	1	1		9,566	9,794							<u>AMRO-292, Nursing (Zone IV)</u> (For text see page 76)		P4
	1	1		2,630	2,630							Nurse, .606 Clerk Stenographer, .612		LL4
				12,196	12,424							Cost of salaries		
				4,629	3,577							Common Staff Costs		
				2,200	2,200							Duty Travel		
	2	2		19,025	18,201									
												<u>AMRO-316, Tuberculosis Control (Zone IV)</u> (For text see page 76)		P5
												Medical Officer, 4.4513 Public Health Nurse, 4.4515.		P3
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
				8,600								Fellowships		
				8,600										
	1	1		6,698	9,117							<u>AMRO-317, Medical Care (Zone IV)</u> (For text see page 76)		P4
				5,106	3,860							Medical Officer, .4016		
				3,000	3,000							Common Staff Costs		
												Duty Travel		
	1	1		14,804	15,977									
												<u>AMRO-318, Planning (Zone IV)</u> (For text see page 77)		
				1,400	2,800							Short-term Consultants Fees Travel		
				1,800	3,600							Fellowships		
					6,300									
				3,200	12,700									
1	6	6	21,035	99,985	101,615	4	1	1	75,054	24,684	26,204	TOTAL - INTERCOUNTRY PROGRAMS		
6	10	10	143,860	231,749	232,942	37	34	34	746,737	646,318	654,272	TOTAL - ZONE IV PROGRAMS		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															1,500	3,200	3,200
													2	2		19,025	18,201
1	1	1		10,845	11,105												
1	1	1		8,108	8,318												
				18,953	19,423												
				8,401	7,234												
				6,880	6,880												
					8,600												
2	2	2	30,706	34,234	42,137							2	2	2	30,706	42,834	42,137
													1	1		14,804	15,977
																3,200	12,700
5	4	4	83,407	72,498	77,500							10	11	11	179,496	197,167	205,319
11	11	12	188,978	182,171	211,165	22	23	21	362,425	375,592	382,739	76	78	77	1,442,000	1,435,830	1,481,118

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE V		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - RIO DE JANEIRO</u> (For text see page 39)		
1	1	1		12,710	13,130							Zone Representative, .700		D1
1												Assistant Zone Representative, 4.5505		P5
1												Sanitary Engineer, .5012		P4
1	1	1		10,282	10,542							Nurse, .5008		P4
1	1	1		2,474	2,545							Administrative Officer, .705		P4
3	3	3		7,054	7,271							Accounting Assistant, .706		RL8
1												Secretary, .707, .5004, .5011		RL6
1												Secretary, .718		RL5
1	1	1		2,036	2,102							Clerk Stenographer, .708		RL4
1	1	1		1,063	1,063							Clerk, .709		RL4
1	1	1		936	969							Chauffeur, .711		RL2
												Janitor-Office Boy, .712		RL2
				36,555	37,622							Cost of salaries		
				14,557	18,587							Common Staff Costs		
				51,112	56,209							Cost of Staff		
				3,808	3,808							Duty Travel		
				300	300							Hospitality		
												Common Services		
				3,735	3,735							Space and Equipment Services		
				8,685	8,235							Other Services		
				1,170	1,260							Supplies and Materials		
				405	405							Fixed Charges and Claims		
				3,000	500							Acquisition of Capital Assets		
13	9	9	115,268	72,215	74,452							TOTAL		
												<u>BRAZIL</u>		
												<u>BRAZIL-3, Health Services in Nine Northeast States</u> (For text see page 78)		
												Medical Officer, 4.5509		P5
												Medical Officer, 4.5511		P4
												Statistician, 4.5510		P4
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>BRAZIL-7, Nutrition (Rio Grande do Norte)</u> (For text see page 78)		
			8,600	8,600	8,600							Fellowships		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962	1963	1964	62 63 64			1962	1963	1964	62 63 64			1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		10,845	11,105							1	1	1		12,710	13,130
												1	1	1		10,845	11,105
												1		1			
												1	1	1		10,282	10,542
												1	1	1		2,474	2,545
												3	3	3		7,054	7,271
												1		1			
												1	1	1		2,036	2,102
												1	1	1		1,063	1,063
												1	1	1		936	969
				10,845	11,105											47,400	48,727
				4,025	5,977											18,582	24,564
				14,870	17,082											65,982	73,291
				3,000	3,000											6,808	6,808
																300	300
																4,150	4,150
																9,650	9,150
																1,300	1,400
																450	450
																3,000	500
1	1	1	17,013	19,425	21,597							14	10	10	132,281	91,640	96,049
1	1	1		10,867	11,127												
					6,067												
1	1	1		9,138	9,380												
				20,005	26,574												
				8,075	13,175												
				1,920	3,120												
				8,600	17,200					4,300	4,300						
2	2	3	26,555	38,600	60,069					4,300	4,300	2	2	3	26,555	42,900	64,369
															(1,100,000)	(1,100,000)	(1,100,000)
															8,600	8,600	8,600

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE V		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-8, National Virus Laboratory Services</u> (For text see page 78)  Virologist, 4.5507  Common Staff Costs  Fellowships  Estimated Government Contribution		P4
				2,100								<u>BRAZIL-18, National Food and Drug Service</u> (For text see page 78)  Short-term Consultants Fees Travel  Fellowships  Estimated Government Contribution		
				2,700										
				4,300	4,300									
			9,100	9,100	4,300									
												<u>BRAZIL-19, School of Public Health in Rio de Janeiro</u> (For text see page 79)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships  Estimated Government Contribution		
												<u>BRAZIL-24, Malaria Eradication</u> (For text see page 79)  Chief Country Malaria Adviser, 9390 Medical Officer, 9385, 9391, 9392, 9393 Sanitary Engineer, 9028, 9377, 9394 Administrative Methods Consultant, 9379 Sanitarian, 9378, 9395, 9396  Cost of salaries  Common Staff Costs  Duty Travel  Supplies and Equipment  Fellowships  Estimated Government Contribution		P5 P4 P4 P4 P2
						1	1	1	10,845	11,105				
						4	4	4	38,264	39,250				
						3	3	3	29,572	30,200				
						1	1	1	9,957	10,217				
						3	3	3	18,795	19,359				
									107,433	110,131				
									45,507	52,878				
									27,600	27,600				
									85,000	85,000				
									18,300	18,300				
						12	12	12	273,524	283,840	293,909			
												Estimated Government Contribution		



PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE V		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-28, PAHO Fellowships for Health Services</u> (For text see page 79)  Fellowships		
			13,300	12,900	17,200									
												<u>BRAZIL-35, School of Public Health in Sao Paulo</u> (For text see page 79)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships  Grant		
												Estimated Government Contribution		
												<u>BRAZIL-37, Dental Health Education</u> (For text see page 79)  Fellowships		
			2,000	2,100	6,000									
												<u>BRAZIL-38, Smallpox Eradication</u> (For text see page 80)  Supplies and Equipment  Fellowships		
				2,000	2,000									
				2,100										
			2,000	4,100	2,000									
												<u>BRAZIL-39, Health Services (Mato Grosso)</u> (For text see page 80)  Medical Officer, .5014 Sanitary Engineer, .5009 Public Health Nurse, .5010		
1	1	1		9,118	9,360							Cost of salaries		
1	1	1		9,118	9,360							Common Staff Costs		
1	1	1		8,993	9,240							Duty Travel		
				27,229	27,960							Fellowships		
				9,706	13,548									
				2,160	2,160									
				4,300	4,300									
3	3	3	36,973	43,395	47,968							Estimated Government Contribution		



WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															13,300	12,900	17,200
				1,400	1,400												
				1,800	1,800												
				15,000	15,000												
				8,600	8,600												
				6,000	11,000												
			20,441	32,800	37,800										20,441	32,800	37,800
															(150,000)	(150,000)	(150,000)
															2,000	2,100	6,000
															2,000	4,100	2,000
												3	3	3	36,973	43,395	47,968
															(100,000)	(120,000)	(140,000)



**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62			63			64			1962			1963			1964		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												4	4	4	93,416	95,727	102,195
															(1,000,000)	(1,000,000)	(1,000,000)
				1,400													
				1,800													
				500	500												
				2,100	1,600												
			5,100	5,800	2,100										5,100	5,800	2,100
															(30,000)	(30,000)	(30,000)
															1,000	3,100	1,500
															4,300	2,600	2,500



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															9,900	6,400	2,000
															14,400	14,400	14,400
															6,000	6,000	6,000
													1	1		20,489	26,122
													1	1		22,201	29,753

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE V		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-61, Nutrition Course for Physicians (Recife)</u> (For text see page 82)		
					5,500							Fellowships		
				5,000	5,000							Grant		
				5,000	10,500									
												<u>BRAZIL-62, Nutrition Course for Public Health Professional Personnel (Sao Paulo)</u> (For text see page 82)		
					4,000							Grant		
												<u>BRAZIL-63, Training of Nursing Auxiliaries</u> (For text see page 83)		
		1			8,930							Nursing Consultant, .5018		
					5,825							Common Staff Costs		
					500							Supplies and Equipment		
					10,000							Fellowships		
		1			25,255									
												<u>BRAZIL-64, Pediatric Education (Recife)</u> (For text see page 83)		
					2,100							Short-term Consultants		
					2,700							Fees		
					6,000							Travel		
												Fellowships		
					10,800									
												<u>BRAZIL-65, Planning</u> (For text see page 83)		
				1,400	1,400							Short-term Consultants		
				1,800	1,800							Fees		
					6,300							Travel		
												Fellowships		
				3,200	9,500									
3	5	6	93,173	149,185	213,998	16	16	16	381,340	393,967	410,504	TOTAL - BRAZIL		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64			1962	1963	1964	62 63 64			1962	1963	1964	62 63 64			1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															5,000	10,500	
																	4,000
													1				25,255
																	10,800
																3,200	9,500
2	2	3	56,396	88,700	111,469	1	1	1	14,583	24,382	31,457	22	24	26	545,492	656,234	767,428

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE V		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>INTERCOUNTRY PROGRAMS</u>		
									4,624	10,000	10,000	<u>AMRO-137, Training Center for Malaria Eradication (Sao Paulo)</u> (For text see page 83) Grant		
												<u>AMRO-189, Veterinary Public Health (Zone V)</u> (For text see page 83) Public Health Veterinarian, 4,701 Common Staff Costs Duty Travel		
1	1	1		9,118	9,360							<u>AMRO-201, Health Statistics (Zone V)</u> (For text see page 83) Statistician, .5002 Common Staff Costs Duty Travel Fellowships		
				3,560	4,707									
				360	360									
				4,300	4,300									
1	1	1	15,136	17,338	18,727							Estimated Government Contribution		
												<u>AMRO-208, Sanitary Engineering (Zone V)</u> (For text see page 84) Sanitary Engineer, .5012 Secretary, .718 Cost of salaries Common Staff Costs Duty Travel Fellowships		
	1	1		11,316	11,420							P4 RL5		
	1	1		1,980	2,054									
				13,296	13,474									
				8,047	5,079									
				2,600	2,600									
				8,600	8,600				4,000	9,000				
	2	2		32,543	29,753				4,000	9,000				
												<u>AMRO-293, Nursing (Zone V)</u> (For text see page 84) Nurse, .5008 Clerk Stenographer, .708 Cost of salaries Common Staff Costs Duty Travel		
	1	1		9,717	9,957							P4 RL4		
	1	1		1,812	1,879									
				11,529	11,836									
				4,447	3,105									
				2,250	2,250									
	2	2		18,226	17,191									
1	5	5	15,136	68,107	65,671				4,624	14,000	19,000	TOTAL - INTERCOUNTRY PROGRAMS		
4	10	11	108,309	217,292	279,669	16	16	16	385,964	407,967	429,504	TOTAL - ZONE V PROGRAMS		



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62 63 64

1962 1963 1964

62 63 64

1962 1963 1964

62 63 64

1962 1963 1964

\$ \$ \$

\$ \$ \$

\$ \$ \$

4,624 10,000 10,000

1 1 1

10,303 10,563

8,697 4,549

1,945 1,945

1 1 1

16,470 20,945 17,057

1 1 1

16,470 20,945 17,057

1 1 1

15,136 17,338 18,727

(5,000) (5,000) (5,000)

9,800

2 2

9,800 36,543 38,753

2 2

18,226 17,191

1 1 1

26,270 20,945 17,057

2 6 6

46,030 103,052 101,728

3 3 4

82,666 109,645 128,526

1 1 1

14,583 24,382 31,457

24 30 32

591,522 759,286 869,156

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - BUENOS AIRES</u> (For text see page 39)		
1	1	1		14,530	14,530							Zone Representative, .800		D1
1	1	1		10,845	11,105							Assistant Zone Representative, .804		P5
1												Nurse, .805		P4
1	1	1		10,282	10,542							Administrative Officer, .806		P4
1	1	1		6,970	7,155							Accounts and Budget Officer, .807		P2
1	1	1		3,867	3,988							Assistant Accountant, .6012		BAL6
1	1	1		4,673	4,761							Accounting Clerk, .836		BAL6
2	2	2		7,674	7,916							Secretary, .808, .811		BAL6
1	1	1		2,903	3,015							Personnel Clerk, .6036		BAL5
5	3	3		8,934	9,270							Clerk Stenographer, .809, .810, .843, .6013, .6022		BAL5
1	1	1		2,670	2,763							Clerk, .812		BAL4
1	1	1		1,916	1,988							Chauffeur, .813		BAL3
1	1	1		1,916	1,988							Messenger, .814		BAL2
				2,000	2,000							Estimated Local Wage Increases		
				79,180	81,021							Cost of salaries		
				24,060	25,923							Common Staff Costs		
				103,240	106,944							Cost of Staff		
				4,460	4,460							Duty Travel		
				300	300							Hospitality		
				4,600	4,600							Common Services		
				16,700	16,700							Space and Equipment Services		
				4,500	4,500							Other Services		
				800	800							Supplies and Materials		
				1,500	1,500							Fixed Charges and Claims		
												Acquisition of Capital Assets		
18	15	15	164,984	136,100	139,804							TOTAL		
												ARGENTINA		
												<u>ARGENTINA-3, Nursing Education</u> (For text see page 85)		
												Nurse Educator, 4.854, 4.855, 4.861, 4.6508, 4.6528		P3
												Common Staff Costs		
												Duty Travel		
				4,300	8,600							Fellowships		
				4,300	8,600							Estimated Government Contribution		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		14,530	14,530
												1	1	1		10,845	11,105
												1	1	1			
												1	1	1		10,282	10,542
												1	1	1		6,970	7,155
												1	1	1		3,867	3,988
												1	1	1		4,673	4,761
												2	2	2		7,674	7,916
												1	1	1		2,903	3,015
												5	3	3		8,934	9,270
												1	1	1		2,670	2,763
												1	1	1		1,916	1,988
												1	1	1		1,916	1,988
																2,000	2,000
																79,180	81,021
																24,060	25,923
																103,240	106,944
																4,460	4,460
																300	300
																5,111	5,111
				511	511											18,560	18,560
				1,860	1,860											5,000	5,000
				500	500											885	885
				85	85											1,500	1,500
			5,440	2,956	2,956							18	15	15	170,424	139,056	142,760
						4	5	5		40,166	43,045						
										17,284	22,632						
										2,630	2,630						
						4	5	5	48,823	60,080	68,307	4	5	5	48,823	64,380	76,907
															(387,000)	(387,000)	(387,000)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-4, National Institute of Microbiology</u> (For text see page 85)		
												Short-term Consultants Fees Travel Fellowships		
												Estimated Government Contribution		
												<u>ARGENTINA-7, Health Services</u> (El Chaco, Rio Negro, Misiones) (For text see page 85)		
												Medical Officer, 4.863 Sanitary Engineer, 4.6504 Health Educator, 4.6510 Public Health Nurse, 4.860		P4 P4 P4 P3
												Cost of salaries Common Staff Costs Duty Travel Fellowships		
												Estimated Government Contribution		
												<u>ARGENTINA-8, Malaria Eradication</u> (For text see page 86)		
						1	1	1	9,118	9,360		Chief Malaria Adviser, 9354 Sanitarian, 9355		P5 P2
						1	1	1	6,265	6,453				
									15,383	15,813		Cost of salaries		
									7,789	10,119		Common Staff Costs		
									6,780	6,780		Duty Travel		
									6,000	6,000		Supplies and Equipment		
									6,000	6,000		Fellowships		
						2	2	2	39,124	41,952	44,712			
												Estimated Government Contribution		
												<u>ARGENTINA-13, PAHO Fellowships for Health Services</u> (For text see page 86)		
			4,300	8,600	12,900							Fellowships		

## WORLD HEALTH ORGANIZATION

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

## T O T A L S

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				10,500 13,500	10,500 13,500												
				8,300	10,300												
			8,700	32,300	34,300										8,700	32,300	34,300
															(61,700)	(61,700)	(61,700)
						1	1	1		9,603	9,832						
						1	1	1		9,530	9,755						
						1	1	1		9,118	9,360						
						1	1	1		8,405	8,615						
										36,656	37,562						
										17,999	20,885						
										1,784	1,784						
										4,300	4,300						
						4	4	4	52,017	60,739	64,531	4	4	4	52,017	60,739	64,531
															(1,800,000)	(1,800,000)	(1,800,000)
												2	2	2	39,124	41,952	44,712
															(3,766,222)	(3,766,222)	(3,766,222)
															4,300	8,600	12,900

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-17, School of Public Health</u> (For text see page 86)		P4
												Professor of Public Health, 4.6509 Common Staff Costs Short-term Consultants Fees Travel Supplies and Equipment Fellowships		
												Estimated Government Contribution		
												<u>ARGENTINA-18, Medical Education</u> (For text see page 86)		
												All Purposes		
												<u>ARGENTINA-20, Tuberculosis Control</u> (For text see page 86)		
												Short-term Consultants Fees Travel Fellowships		
												Estimated Government Contribution		
												<u>ARGENTINA-24, Planning and Organization of Hospital Services</u> (For text see page 86)		
				3,300	7,600							Fellowships		
												<u>ARGENTINA-25, Training of Nursing Personnel</u> (For text see page 87)		P3
1	1	1		7,950	8,160							Nurse Educator, .6016 Common Staff Costs Duty Travel Supplies and Equipment Fellowships		
				2,883	4,434									
				1,440	1,440									
				1,000	1,000									
				3,300	5,300									
1	1	1	14,228	16,573	20,334									
												Estimated Government Contribution		
												<u>ARGENTINA-27, Mental Health</u> (For text see page 87)		
				2,100	2,100							Short-term Consultants Fees Travel Fellowships		
				2,700	2,700									
				4,300	8,600									
			10,452	9,100	13,400									
												Estimated Government Contribution		

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		9,118	9,360												
				4,688	5,359												
				2,100	4,200												
				2,700	5,400												
				1,800	1,800												
				8,600	6,300												
1	1	1	9,781	29,006	32,419							1	1	1	9,781	29,006	32,419
															(500,000)	(500,000)	(500,000)
			7,500												7,500		
				8,400	8,400												
				10,800	10,800												
				4,300	4,300												
			25,900	23,500	23,500										25,900	23,500	23,500
															(323,000)	(323,000)	(323,000)
																3,300	7,600
												1	1	1	14,228	16,573	20,334
															(150,000)	(150,000)	(150,000)
															10,452	9,100	13,400
															(3,750,000)	(3,750,000)	(3,750,000)

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-28, Leprosy Control</u> (For text see page 87)		
												Fellowships		
												<u>ARGENTINA-29, Promotion of Community Water Supplies</u> (For text see page 88)		
												Short-term Consultants		
										4,200	4,200	Fees		
										5,400	5,400	Travel		
									9,600	9,600	9,600			
												<u>ARGENTINA-30, Sanitary Engineering Education</u> (For text see page 88)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
			7,500	8,700	7,500									
												<u>ARGENTINA-32, Health Statistics</u> (For text see page 88)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
												<u>ARGENTINA-33, Maternal and Child Health</u> (For text see page 88)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
												<u>ARGENTINA-35, Public Health Services (San Juan)</u> (For text see page 88)		
1	1	1		9,340	9,567							Medical Officer, .6024		
1	1	1		9,260	9,438							Sanitary Engineer, .6025		
1	1	1		5,595	7,618							Legal and Administrative Officer, .6037		
				24,135	26,623							Public Health Nurse, .6026		
				25,077	16,746							Cost of salaries		
				1,380	1,380							Common Staff Costs		
				3,300	8,300							Duty Travel		
												Fellowships		
3	3	3	50,296	53,892	53,049									

P4  
P4  
P4  
P3



**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				2,500	4,500											2,500	4,500
															9,600	9,600	9,600
															7,500	8,700	7,500
																7,500	7,500
				4,200	4,200												
				5,400	5,400												
				4,300	4,300												
			4,300	13,900	13,900										4,300	13,900	13,900
												3	3	3	50,296	53,892	53,049



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												2	1		35,428	11,560	
															(368,160)	(368,160)	
1	1	1	56,181	101,206	108,619	8	9	9	100,840	120,819	132,838	17	17	16	327,949	397,102	426,652
						1	1	1	8,388		8,598						
						1	1	1	7,618		7,828						
									16,006		16,426						
									16,623		12,966						
									1,860		1,860						
						2	2	2	29,000	34,489	31,252	2	2	2	29,000	34,489	31,252
						1	1	1	10,022		10,282						
									8,844		6,084						
									4,800		4,800						
									4,800		4,800						
									1,680		1,680						
									5,000		5,000						
									6,000		6,000						
									15,763	41,146	38,646						
									15,900		21,200						
									15,900		21,200						
									121,900		2,500						
									8,000		8,000						
									124,500	161,700	52,900						
						1	1	1	140,263	202,846	91,546	1	1	1	140,263	205,346	98,346

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE VI	GRADE	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	<u>CHILE-26, PAHO Fellowships for Health Services</u> (For text see page 89) Fellowships	
			4,300	4,300	8,600								
												<u>CHILE-27, Health Services (Ovalle-Copiapo)</u> (For text see page 89) All Purposes	
			6,400										
												Estimated Government Contribution	
												<u>CHILE-31, School of Public Health</u> (For text see page 90) Short-term Consultants Fees Travel Supplies and Equipment Fellowships	
												Estimated Government Contribution	
												<u>CHILE-35, Nutrition</u> (For text see page 90) Fellowships	
												<u>CHILE-37, Medical Education</u> (For text see page 90) Short-term Consultants Fees Travel Supplies and Equipment Fellowships	
				1,400	2,800								
				1,800	3,600								
				1,000	1,000								
				8,800	8,600								
			12,900	13,000	16,000								
												<u>CHILE-39, Training in the Medical Use of Radioisotopes</u> (For text see page 90) Supplies and Equipment	
			1,300	1,000	1,000								
												<u>CHILE-40, Promotion of Community Water Supplies</u> (For text see page 90) Short-term Consultants Fees Travel	
										6,300	6,300		
										8,100	8,100		
									14,400	14,400	14,400		

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															4,300	4,300	8,600
															6,400		
															(500,000)		
					2,800												
					3,600												
				1,000	1,000												
				7,500	7,500												
			12,400	8,500	14,900										12,400	8,500	14,900
															(400,000)	(400,000)	(400,000)
					4,300												4,300
															12,900	13,000	16,000
															1,300	1,000	1,000
															14,400	14,400	14,400

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>CHILE-41, National Planning for Nursing</u> (For text see page 91)  Nurse, 4.6516  Common Staff Costs  Duty Travel  Supplies and Equipment  Fellowships		P4
1			20,265									<u>CHILE-43, Administrative Methods and Practices in Public Health</u> (For text see page 91)  Administrative Methods Officer, .6034		P4
			10,700									<u>CHILE-44, Cancer</u> (For text see page 91)  All Purposes		
												<u>CHILE-49, Health Services</u> (For text see page 91)  Short-term Consultants Fees Travel		
												<u>CHILE-52, Community Development (Chiloé Island)</u> (For text see page 92)  Public Health Administrator, 4.6525		P4
1			55,865	20,800	32,400				14,400	14,400	14,400	TOTAL - CHILE		
												<u>PARAGUAY</u>  <u>PARAGUAY-1, Malaria Eradication</u> (For text see page 92)		
						1	1	1	9,640	9,870		Malariologist, 9136		P4
						1	1	1	9,717	9,957		Sanitary Engineer, 9234		P4
						1	1	1	7,793	8,003		Entomologist, 9313		P3
						3	3	3	20,294	20,883		Sanitarian, 9206, 9235, 9361		P2
									47,444	48,713		Cost of salaries		
									40,187	31,894		Common Staff Costs		
									12,480	12,480		Duty Travel		
									6,000	6,000		Supplies and Equipment		
									8,600	8,600		Fellowships		
						6	6	6	101,451	114,711	107,687	Estimated Government Contribution		

WORLD HEALTH ORGANIZATION												TOTALS					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		9,870	10,130												
				6,917	3,629												
				2,600	2,600												
				500	500												
				4,300	4,300												
1	1	1	15,196	24,187	21,159							1	1	1	15,196	24,187	21,159
												1			20,265		
															10,700		
										4,800	4,800						
										4,800	4,800						
										9,600	9,600					9,600	9,600
						1			13,635			1			13,635		
1	1	1	27,596	32,687	40,359	4	3	3	182,898	246,935	132,398	6	4	4	280,759	314,822	219,557
												6	6	6	101,451	114,711	107,687
															(195,000)	(203,617)	(203,617)

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>PARAGUAY-10, Health Services</u> (For text see page 92)		
1												Chief Country Adviser, 4.830 Sanitary Engineer, 4.831 Epidemiologist, 4.862 Administrative Methods Officer, .601D Statistician, 4.6519 Public Health Nurse, 4.823, 4.6529		P5 P4 P4 P4 P3 P3
												Cost of salaries Common Staff Costs Duty Travel Fellowships		
1			19,367									Estimated Government Contribution		
												<u>PARAGUAY-13, PAHO Fellowships for Health Services</u> (For text see page 92)		
			4,300	8,600	8,600							Fellowships		
												<u>PARAGUAY-19, Promotion of Community Water Supplies</u> (For text see page 93)		
						1	1	1		6,698	9,118	Sanitary Engineer, 9441		P4
										5,956	4,941	Common Staff Costs		
										1,400	1,400	Short-term Consultants Fees		
										1,800	1,800	Travel		
										387	585	Duty Travel		
						1	1	1	1/14,869	16,241	17,844			
1			23,667	8,600	8,600	7	7	7	116,320	130,952	125,531	TOTAL - PARAGUAY		
												<u>URUGUAY</u>		
												<u>URUGUAY-5, National Health Services</u> (For text see page 93)		
												Chief Country Adviser, 4.846 Sanitary Engineer, 4.847 Hospital Administrator, 4.6527 Public Health Nurse, 4.848		P5 P4 P4 P3
												Cost of salaries Common Staff Costs Duty Travel Fellowships		
												Estimated Government Contribution		

1/ Includes contributions of: \$3,669 from the United Nations Children's Fund and \$11,200 from the Community Water Supply Fund.



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						1	1	1		11,853	12,143						
						1	1	1		9,793	10,043						
						1	1	1		9,603	9,832						
						1	1	1		7,810	8,020						
						1	2	2		13,213	15,446						
										52,272	55,484						
										38,719	40,963						
										2,490	2,490						
										6,000	6,000						
						5	6	6	71,245	99,481	104,937	6	6	6	90,612	99,481	104,937
															(1,147,920)	(1,147,920)	(1,147,920)
															4,300	8,600	8,600
												1	1	1	14,869	16,241	17,844
						5	6	6	71,245	99,481	104,937	13	13	13	211,232	239,033	239,068
						1	1	1		10,845	11,105						
						1	1	1		9,118	9,360						
						1	1	1		9,118	9,360						
						1	1	1		9,034	9,280						
										38,115	39,105						
										16,262	19,500						
										2,240	2,030						
										4,300	4,300						
						4	4	4	61,250	60,917	64,935	4	4	4	61,250	60,917	64,935
															(1,500,000)	(1,500,000)	(1,500,000)

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE VI	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	URUGUAY-9, Chagas' Disease (For text see page 93)	
			4,700									All Purposes	
												URUGUAY-10, PAHO Fellowships for Health Services (For text see page 93)	
			5,500	6,300	8,600							Fellowships	
												URUGUAY-13, Training of Health Personnel (For text see page 93)	
1	1	1		7,618	7,828							Nurse Educator, .6018	P3
				3,624	4,777							Common Staff Costs	
				425	425							Duty Travel	
				1,000	1,000							Supplies and Equipment	
				4,300	4,300							Fellowships	
1	1	1	14,064	16,967	18,330							Estimated Government Contribution	
												URUGUAY-16, Chronic Diseases (For text see page 93)	
				2,100	2,100							Short-term Consultants Fees	
				2,700	2,700							Travel	
				3,000	3,000							Fellowships	
			7,800	7,800	7,800							Estimated Government Contribution	
												URUGUAY-18, Promotion of Community Water Supplies (For text see page 94)	
												Short-term Consultants Fees	
										4,200	4,200	Travel	
										5,400	5,400		
									9,600	9,600	9,600		
1	1	1	32,064	31,067	34,730				9,600	9,600	9,600	TOTAL - URUGUAY	

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															4,700		
															5,500	6,300	8,600
												1	1	1	14,064	16,967	18,330
															(350,000)	(350,000)	(350,000)
															7,800	7,800	7,800
															(50,000)	(50,000)	(50,000)
															9,600	9,600	9,600
						4	4	4	61,250	60,917	64,935	5	5	5	102,914	101,584	109,265

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
1	1	1		9,420	9,640							<u>INTERCOUNTRY PROGRAMS</u>  <u>AMRO-159, Health Statistics (Zone VI)</u> (For text see page 94)  Statistician, .6002  Common Staff Costs  Duty Travel  Supplies and Equipment		
			15,951	21,197	17,098									
1	1	1		11,420	11,420							<u>AMRO-163, Epidemiology (Zone VI)</u> (For text see page 94)  Epidemiologist, .6003  Common Staff Costs  Duty Travel		
				7,426	10,426									
				3,650	3,650									
1	1	1	24,429	22,496	25,496									
	1	1		10,563	10,823							<u>AMRO-209, Sanitary Engineering (Zone VI)</u> (For text see page 94)  Sanitary Engineer, .6021, 4.6521 Secretary, .6013  Cost of salaries  Common Staff Costs  Duty Travel  Supplies and Equipment  Fellowships		
	1	1		3,071	3,183							P4 BAL5		
				13,634	14,006									
				7,010	11,051									
				3,650	3,650									
				12,900	12,900					3,000				
	2	2		37,194	41,607					7,000	9,000			
1	1	1		10,845	11,105							<u>AMRO-210, Medical Education (Zone VI)</u> (For text see page 95)  Professional Educator, .6033  Common Staff Costs  Duty Travel		
				4,880	6,057							P5		
				960	960									
1	1	1	9,698	*16,685	*18,122									
	1	1		10,281	10,542							<u>AMRO-294, Nursing (Zone VI)</u> (For text see page 95)  Nurse, .805 Secretary, .6022  Cost of salaries  Common Staff Costs  Duty Travel		
	1	1		2,959	3,071							P4 BAL5		
				13,240	13,613									
				4,009	3,912									
				2,540	2,540									
	2	2		19,789	20,065									

\*Special Fund for Health Promotion (See Annex 4).

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	15,951	21,197	17,098
												1	1	1	24,429	22,496	25,496
1																	
1			35,037									1	2	2	35,037	44,194	50,607
												1	1	1	9,698	16,685	18,122
												2	2			19,789	20,065

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE VI		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
1	1	1		10,108	10,368								AMRO-304, Medical Care (Zone VI) (For text see page 95)	
				5,541	5,215								Hospital Administrator, .6015	P4
				1,600	1,600								Common Staff Costs	
				360	360								Duty Travel	
													Supplies and Equipment	
1	1	1	22,174	17,609	17,543				1/10,002					
													AMRO-305, Leprosy Control (Zone VI) (For text see page 95)	
													Leprosy Adviser, 4.850	P4
													Common Staff Costs	
													Duty Travel	
													Fellowships	
													AMRO-319, Administrative Methods and Practices in Public Health (Zone VI) (For text see page 95)	
				2,800	2,800								Short-term Consultants	
				3,600	3,600								Fees	
				6,400	6,400								Travel	
													AMRO-321, Nutrition Advisory Services (Zone VI) (For text see page 95)	
	1	1		6,698	9,118								Nutritionist, .6038	P4
				5,700	6,118								Common Staff Costs	
				2,500	2,500								Duty Travel	
	1	1		14,898	17,736									
													AMRO-322, Planning (Zone VI) (For text see page 96)	
	1	1		7,987	10,845								Planning Officer, .6039	P5
				4,909	5,593								Common Staff Costs	
				1,620	1,900								Duty Travel	
				3,500	8,000								Fellowships	
	1	1		18,016	26,338									
4	10	10	72,252	174,284	190,405				10,002	7,000	9,000		TOTAL - INTERCOUNTRY PROGRAMS	
13	16	15	306,052	358,276	397,018	9	9	9	199,046	213,504	212,843		TOTAL - ZONE VI PROGRAMS	

1/ Grant from the W. K. Kellogg Foundation.

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62			1962			62			1962			62			1962		
63	64		\$	\$	\$	63	64		\$	\$	\$	63	64		\$	\$	\$
												1	1	1	32,176	17,609	17,543
1	1	1		9,678	9,913												
				6,830	6,127												
				2,650	2,650												
				6,000													
1	1	1	16,861	25,158	18,690							1	1	1	16,861	25,158	18,690
																6,400	6,400
													1	1		14,898	17,736
													1	1		18,016	26,338
2	1	1	51,898	25,158	18,690							6	11	11	134,152	206,442	218,095
4	3	3	135,675	159,051	167,668	21	22	22	416,233	528,152	435,108	47	50	49	1,057,006	1,258,983	1,212,637

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			WASHINGTON OFFICE - COUNTRY PROGRAMS		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>CANADA</u>		
												<u>CANADA-2, Consultants in Specialized Fields of Public Health</u> (For text see page 97)		
												Short-term Consultants Fees Travel		
												<u>CANADA-200, WHO Fellowships for Health Services</u> (For text see page 97)		
												Fellowships		
												TOTAL - CANADA		
												<u>UNITED STATES</u>		
												<u>UNITED STATES-10, Consultants in Specialized Fields of Public Health</u> (For text see page 97)		
												Short-term Consultants Fees Travel		
												<u>UNITED STATES-11 (PAHO), UNITED STATES-200 (WHO), Fellowships for Health Services</u> (For text see page 97)		
			19,000	25,000	25,000							Fellowships		
												<u>UNITED STATES-12, Medical and Public Health Training</u> (For text see page 97)		
			11,000	5,000	5,000							Grant		
			30,000	30,000	30,000							TOTAL - UNITED STATES		
												<u>AMRO-307, Field Office - El Paso</u> (For text see page 97)		
1	1	1		11,829	12,119							Chief, Field Office, .334		P5
1	1	1		10,650	10,910							Sanitary Engineer, .7060		P4
1	1	1		9,640	9,870							Veterinary Public Health Adviser, .7099		P4
1	1	1		8,668	8,878							Nurse, .7091		P3
1												Administrative Officer, .7059		P2
3	3	3		11,591	11,688							Clerk Stenographer, .326, .327, .7104		EPL3
				52,378	53,465							Cost of salaries		
				20,299	24,632							Common Staff Costs		





PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			WASHINGTON OFFICE - COUNTRY PROGRAMS		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	AMRO-307, (continued)		
				1,400	1,400							Short-term Consultants		
				1,800	1,800							Fees		
												Travel		
				10,190	10,100							Duty Travel		
				5,300	1,700							Supplies and Equipment		
				3,035	3,035							Common Services		
				4,000	4,000							Conference Services		
				200	200							Hospitality		
8	7	7	98,072	98,602	100,332									
8	7	7	128,072	128,602	130,332							TOTAL - WASHINGTON OFFICE - COUNTRY PROGRAMS		
												PART III		
												FIELD AND OTHER PROGRAMS		
												INTERZONE		
1	1	1		10,004	10,264							AMRO-3, Rehabilitation (For text see page 97)		P4
				2,731	3,701							Medical Officer, .7134		
				3,000	3,000							Common Staff Costs		
												Duty Travel		
1	1	1	15,934	15,735	16,965									
												AMRO-9.3, Seminar on Alcoholism (For text see page 97)		
			2,000									Supplies and Materials		
												AMRO-10, Program for Biostatistics Education (For text see page 98)		
												Contractual Technical Services		
												Fellowships		
												AMRO-16, Schools of Public Health (For text see page 98)		
												Short-term Consultants		
												Fees		
												Travel		
												Supplies and Equipment		
												Fellowships		
				4,000	4,000							Grant		
				4,000	4,000									

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												8	7	7	98,072	98,602	100,332
			31,370	37,838	37,600							8	7	7	159,442	166,440	167,932
												1	1	1	15,934	15,735	16,965
															2,000		
									15,000	15,000							
									19,255	19,255							
									34,255	34,255	34,255				34,255	34,255	34,255
				1,400	2,800												
				1,800	3,600												
				4,000	6,000												
				2,611	3,481												
			4,200	9,811	15,881										4,200	13,811	19,881

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-18, Medical Education</u> (For text see page 98)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment		
												<u>AMRO-28, Advanced Nursing Education</u> (For text see page 98)  Participants		
			56,087	*61,879	*62,000							<u>AMRO-35, Fellowships for Health Services</u> (For text see page 98)  Fellowships		
				1,050 1,350 900 200	1,050 1,350 5,030 200							<u>AMRO-39, Environmental Sanitation (Advisory Committee and Consultants)</u> (For text see page 98)  Short-term Consultants Fees Travel  Duty Travel  Supplies and Equipment		
			5,357	3,500	7,630							<u>AMRO-45, Laboratory Services</u> (For text see page 99)  Laboratory Consultant, .7140 4.7511  Common Staff Costs  Short-term Consultants Fees Travel  Duty Travel  Supplies and Equipment  Fellowships		P4
	1			6,698 5,605 1,400 1,800 10,565 3,000 4,300										
	1			33,368										

\* Of the amount shown, \$48,863 and \$24,775 are a part of the Special Fund for Health Promotion in 1963 and 1964 respectively (See Annex 4).

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				5,600 7,200 15,216	7,700 9,900 17,200 2,000												
			23,400	28,016	36,800										23,400	28,016	36,800
			18,000	30,100	43,000										18,000	30,100	43,000
															56,087	61,879	62,000
			11,100												16,457	3,500	7,630
	1				9,117 5,734 2,100 2,700 12,260 2,000 11,740 8,600												
	1			11,740	42,511								1	1		45,108	42,511

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			<u>AMRO-46, Seminar on Nursing Education</u> (For text see page 99)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment
														<u>AMRO-50, Water Fluoridation</u> (For text see page 99)  Short-term Consultants Fees Travel  Supplies and Equipment
					1,400 1,800 2,000									
					5,200									
				1,400 1,800	3,500 4,500									<u>AMRO-60, Smallpox Eradication</u> (For text see page 99)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment  Contractual Services
			6,200	7,200	27,700									
1														
1	1	2		6,698	18,048									
1	1	1		3,895	4,015									<u>AMRO-62, Public Health Aspects of Housing and Urbanization</u> (For text see page 99)  Engineer, .7136 Housing Specialist, .0061, .0068 Secretary, .7137  Cost of salaries  Common Staff Costs  Short-term Consultants Fees Travel  Duty Travel  Participants  Supplies and Equipment
				10,593	22,063									
				6,992	12,657									
				4,200	4,200									
				5,400	5,400									
				4,490	9,720									
				19,410										
				1,400	1,400									
2	2	3	22,600	52,485	55,440									

P4  
P4  
WL6

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				1,400	1,400												
				1,800	1,800												
				16,631	9,088												
				1,000	1,000												
			17,200	20,831	13,288										17,200	20,831	13,288
																	5,200
															6,200	7,200	27,700
												2	2	3	22,600	52,485	55,440

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS INTERZONE	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
													AMRO-63, Schools of Nursing (For text see page 100)
													Short-term Consultants Fees Travel
													Supplies and Equipment
													Fellowships
													AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine (For text see page 100)
													Short-term Consultants Fees Travel
													Participants
													Supplies and Equipment
													Fellowships
													Common Services
													AMRO-72, Dental Health (For text see page 100)
				1,400	1,400								Short-term Consultants Fees Travel
				1,800	1,800								
				1,000	1,000								Supplies and Equipment
				18,800	20,680								Fellowships
			25,573	*23,000	*24,880				$\frac{1}{12,005}$				
													AMRO-74, Plague Investigation (For text see page 100)
													Short-term Consultants Fees Travel
					1,400								Participants
					1,800								Supplies and Equipment
					9,560								
					1,700								
					14,460								
													AMRO-76, Vaccine Production and Testing (For text see page 100)
													Short-term Consultants Fees Travel
													Contractual Services

$\frac{1}{}$  Contribution from the W. K. Kellogg Foundation.  
\* Special Fund for Health Promotion (See Annex 4).



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				2,800	2,800												
				3,600	3,600												
				2,400	2,400												
				2,615	3,110												
			1,500	11,415	11,910										1,500	11,415	11,910
				1,400	1,400												
				1,800	1,800												
				21,821													
				500	1,000												
				1,000	8,600												
			3,200	26,521	12,800										3,200	26,521	12,800
															37,578	23,000	24,880
																	14,460
				2,800	2,100												
				3,600	2,700												
				9,000	9,000												
			5,250	15,400	13,800										5,250	15,400	13,800

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
AMRO-77, Pan American Foot-and-Mouth Disease Center (For text see page 100)														
						1	1	1		13,100	13,100	Director, .923	P5	
							1	1		10,650	10,650	Assistant Director, 9404	P5	
							1	1		10,650	10,650	Intercountry Mission Chief, 9405	P5	
						1	1	1		10,650	10,650	Chief of Field Services, .924	P4	
							1	1				Chief of Laboratory Services, .925	P4	
						1	1	1		11,660	11,660	Virologist, .926	P4	
						1	1	1		9,300	9,300	Field Officer, .7003, .7004, .7049	P4	
						3	3	3		27,615	27,615	Country Consultant, .7050, .7100, 9406, 9407	P4	
						2	3	4		28,213	37,143	Research Officer, .7101	P4	
						1	1	1		7,565	7,565	Education and Information Officer, 9408	P4	
								1			8,930	Serologist, .927	P3	
						1	1	1		8,930	8,930	Research Officer, .928, .1020	P3	
						2	2	2		15,725	15,725	Technical Officer, .7075	P3	
						1	1	1		8,037	8,037	Administrative Officer, .929	P3	
						1	1	1		7,757	7,757	Assistant Serologist, .930	P2	
						1	1	1		7,186	7,186	Accounting Assistant, .173	WL8	
						1	1	1		5,515	5,515	Senior Research Associate, .987	RL10	
						1	1	1		4,384	4,384	Research Associate, .988	RL9	
						1	1	1		3,997	3,997	Research Assistant, .989	RL8	
						1	1	1		3,610	3,610	Accountant, .7006	RL7	
						1	1	1		3,677	3,677	Assistant Administrative Officer, .931	RL6	
						1	1	1		3,600	3,600	Librarian Editor, .7005	RL6	
						1	1	1		3,010	3,010	Accounting Clerk, .7076	RL6	
						1	1	1		2,932	2,932	Personnel Officer, 9418	RL6	
							1	1		2,710	2,710	Bilingual Secretary, .990, .1007, .1109, .7007	RL5	
						4	4	4		11,351	11,351	Clerk Typist, .934	RL5	
						1	1	1		2,874	2,874	Senior Laboratory Technician, .971	RL5	
						1	1	1		2,826	2,826	Senior Accounting Clerk, .7048	RL5	
						1	1	1		2,777	2,777	General Maintenance Officer, .935	RL5	
						1	1	1		2,710	2,710	Property and Supply Clerk, .933	RL5	
						1	1	1		2,710	2,710	Senior Clerk, .1168	RL4	
						1	1	1		2,439	2,439	Clerk Typist, .7009, .7077, .9411	RL4	
						2	3	3		5,886	5,886	Laboratory Technician, .932, .1011, .7109, 9409	RL4	
						3	3	4		7,083	8,922	Laboratory Clerk, 9410	RL4	
							1	1		1,839	1,839	Utility Foreman, 9412	RL4	
							1	1		1,839	1,839	Laboratory Assistant, .938, .939, .943, .1010, .7012, .7079, 9416	RL3	
						6	6	7		11,034	12,331	Senior Field Aide, 9413	RL3	
							1	1		1,355	1,355	Auxiliary Clerk, .7111	RL3	
						1	1	1		1,387	1,387	Assistant Maintenance Officer, .942, .7110	RL3	
						2	2	2		3,683	3,683	Plumber-Fitter, .7011	RL3	
						1	1	1		1,555	1,555	Electrician, .7010	RL3	
						1	1	1		1,574	1,574	Senior Carpenter, .7080	RL3	
						1	1	1		1,516	1,516	Grounds Foreman, 9414	RL3	
							1	1		1,297	1,297	Custodian, 9415	RL3	
						1	1	1		1,297	1,297	Telephone Operator, .7112	RL2	
						1	1	1		992	992	Messenger, .7078	RL2	
						1	1	1		958	958	Storekeeper, .940	RL2	
						1	1	1		1,297	1,297	Chauffeur, .936, .937, .969, .7081, 9417	RL2	
						4	5	5		6,179	6,179	Laboratory Aide, .986, .1029, .1172, .1173, .1174, .7016, .7017, .7018	RL2	
						8	8	8		10,066	10,066	Laundry Operator-Seamstress, .941	RL2	
						1	1	1		1,340	1,340	Janitor-Office Boy, .944	RL2	
						1	1	1		1,239	1,239	Field Aide, .7019, .7020	RL2	
						2	2	2		2,270	2,270	Guard (Watchman), .1024, .1030, .1045, .7013, .7014, .7015	RL2	
						6	6	6		6,997	6,997	Mason-Painter, .1037	RL2	
						1	1	1		1,297	1,297	Carpenter, .1025	RL2	
						1	1	1		1,272	1,272	Laborer, Cattle Attendant (Sr), .7021, .7022, .7023	RL2	
						3	3	3		3,082	3,082	Laborer, Cattle Attendant (Jr), .7024, .7025, .7026, .7027	RL1	
						4	4	4		3,216	3,216		RL1	

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

**NUMBER  
OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER  
OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER  
OF POSTS**

**ESTIMATED EXPENDITURE**

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$





PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	AMRO-81, (continued)		
				5,276	5,518					720	720	Duty Travel		
				7,500	9,800							Supplies and Equipment		
				14,605	19,510					14,089	15,925	Common Services		
									71,383	80,152	84,378	Total - Government Contribution		
												<u>Operations Financed by Other Contributions</u>		
						1	1	1		9,175	9,420	Vertebrate Ecologist, 9397		P4
						1	1	1		2,342	2,429	Laboratory Technician, .7113		AL7
						1	1	1		2,030	2,102	Laboratory Technician, .7114		AL6
						1	1	1		1,151	1,202	Laboratory Aide, .7115		AL4
						1	1	1		1,193	1,244	Animal Colony Aide, .7116		AL4
						1	1	1		1,230		Animal Caretaker, 9398		AL4
						1	1	1		756	792	Laborer (Laboratory), .7117		AL2
										17,877	17,189	Cost of salaries		
										6,525	6,202	Common Staff Costs		
										4,140	900	Supplies and Equipment		
									29,939	28,542	24,291	Total - Other Contributions		
1	2	2	43,842	63,908	69,171	42	42	41	101,322	108,694	108,669			
												<u>AMRO-85, Latin American Center for Classification of Diseases</u> (For text see page 101)		
												Short-term Consultants Fees Travel		
												Fellowships		
												Grant		
												<u>AMRO-87, Endemic Goiter Prevention</u> (For text see page 102)		
					1,400							Short-term Consultants Fees Travel		
					1,800							Participants		
					15,126									
					18,326									
												<u>AMRO-88, Aedes aegypti Eradication</u> (For text see page 102)		
						7,793						Entomologist, .7139		P3
						5,315						Common Staff Costs		
					4,200	2,800						Short-term Consultants Fees Travel		
					5,400	3,600						Duty Travel		
						3,000						Supplies and Equipment		
					17,000	17,000								
1		1	19,800	26,600	39,508									

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
										4,790	4,790						
						3	3	3	43,570	45,970	46,356	46	47	46	188,734	218,572	224,196
				4,200	4,200												
				5,400	5,400												
				6,225	6,225												
				15,000													
			32,215	30,825	15,825										32,215	30,825	15,825
																	18,326
												1	1		19,800	26,600	39,508

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-90, Malaria Technical Advisory Services</u> (For text see page 102)		
						1	1	1		10,823	11,083	Entomologist, 9261		
						1	1	1		9,957	10,217	Administrative Officer, 9027		
								1		6,697	9,117	Parasitologist, 9428		
								1		6,697	9,117	Health Educator, 9427		
								3		20,091	27,351	Administrative Methods Consultant, 9424, 9425, 9426		
						1	1	1		5,700	5,700	Consultant (Parasitologist), 9252		
										59,965	72,585	Cost of salaries		
										37,676	26,959	Common Staff Costs		
												Short-term Consultants		
										2,800	2,800	Fees		
										3,600	3,600	Travel		
										33,712	33,712	Duty Travel		
										2,000	1,000	Supplies and Equipment		
										500	500	Common Services		
						3	8	8	62,632	140,253	141,156			
												<u>AMRO-94, Diarrheal Diseases in Childhood</u> (For text see page 102)		
1	1	1		8,283	8,493							Statistician, .1145		
1	1	1		8,615	8,825							Bacteriologist, .1144		
				16,898	17,318							Cost of salaries		
				12,429	9,176							Common Staff Costs		
				1,500	1,500							Duty Travel		
2	2	2	31,718	30,827	27,994									
												<u>AMRO-101, Course for Medical Librarians</u> (For text see page 102)		
					14,975							Fellowships		
												<u>AMRO-110, Tuberculosis Control</u> (For text see page 102)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
												Participants		
												<u>AMRO-112, Community Development Training Center</u> (For text see page 103)		
												Medical Officer, 4.2512		
												Common Staff Costs		







**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				1,250	1,250												
				100	100												
1	1	1	16,601	14,907	16,205							1	1	1	16,601	14,907	16,205
												2	2	2	44,399	43,076	45,702
															30,000		
			29,900												29,900	41,050	44,790
			13,600												13,600	25,473	5,920

PAN AMERICAN HEALTH ORGANIZATION												PART III	GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS	
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE	
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	<u>AMRO-150, Food and Drug Services</u> (For text see page 103)	
												Food and Drug Consultant, .7069, .7070	P4
2				4,200 5,400	5,600 7,200							Short-term Consultants Fees Travel	
					500							Supplies and Equipment	
				6,400	6,400							Fellowships	
			40,664	16,000	19,700								
												<u>AMRO-151, Seminar on Teaching of Sanitary Engineering in Schools of Engineering</u> (For text see page 104)	
												Short-term Consultants Fees Travel	
					5,600 7,200							Duty Travel	
					4,409							Participants	
					24,510							Supplies and Equipment	
					2,000								
					43,719								
												<u>AMRO-152, Seminar on Schools of Public Health</u> (For text see page 104)	
												Short-term Consultants Fees Travel	
				2,100 2,700								Participants	
				19,745								Supplies and Equipment	
				750								Common Services	
				250									
				25,545									
												<u>AMRO-155, Schistosomiasis Control</u> (For text see page 104)	
												Short-term Consultants Fees Travel	
					1,400 1,800							Grant	
					500	500							
			5,436	500	3,700								
												<u>AMRO-156, Training Program in Hospital Statistics</u> (For text see page 104)	
1	1	1		7,880	8,090							Medical Records Librarian, .7001	P3
				3,863	2,920							Common Staff Costs	
				1,400 1,800	1,400 1,800							Short-term Consultants Fees Travel	

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												2			40,664	16,000	19,700
																	43,719
																25,545	
															5,436	500	3,700

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS INTERZONE	GRADE		
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
				1,480	1,480								AMRO-156, (continued)	
				1,000	1,000								Duty Travel	
				11,330	17,330								Supplies and Equipment	
													Fellowships	
1	1	1	15,161	28,753	34,020									
													AMRO-160, Yaws Eradication and Venereal Disease Control (For text see page 104)	
				9,055	9,300								Medical Officer, .7105	P4
				7,548	7,775								Laboratory Technician, .7146	P3
				16,603	17,075								Cost of salaries	
				9,465	11,068								Common Staff Costs	
				1,400	2,800								Short-term Consultants	
				1,800	3,600								Fees	
													Travel	
				8,840	9,700								Duty Travel	
				2,000	2,000								Supplies and Equipment	
				3,600	3,605								Fellowships	
1	2	2	22,035	43,708	49,848									
													AMRO-165, Nutrition Advisory Services (Interzone) (For text see page 105)	
				13,394	18,234								Nutrition Adviser, .7141, .7142, 4.7509	P4
				11,712	9,591								Common Staff Costs	
													Short-term Consultants	
													Fees	
													Travel	
				3,771	5,029								Duty Travel	
				8,600	38,200								Fellowships	
2	2	2	30,522	*37,477	*75,854									
													AMRO-181, Live Poliovirus Vaccine Studies (For text see page 105)	
						2	2	2		18,236	10,920		Virologist, .7051, .7118	P4
										10,960	6,442		Common Staff Costs	
										2,000	700		Duty Travel	
										1,000			Supplies and Equipment	
						2	2	2	1/19,900	1/32,196	1/18,062			

1/ Contribution from the American Cyanamid Company.  
\* Special Fund for Health Promotion (See Annex 4).

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	15,161	28,753	34,020
												1	2	2	22,035	43,708	49,848
1																	
1			15,812									3	2	2	46,334	37,477	75,854
												2	2	2	19,900	32,196	18,062

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
1	1	1		9,180	9,420							AMRO-183, Nursing Midwifery (For text see page 105)		
				3,623	2,668							Nurse Midwife, .7094		
				3,375	3,335							Common Staff Costs		
				300	300							Duty Travel		
				8,600	8,600							Supplies and Equipment		
												Fellowships		
1	1	1	16,830	25,078	24,323									
												AMRO-185, Medical Care and Hospital Organization (For text see page 105)		
				16,800	16,800							Short-term Consultants		
				21,600	21,600							Fees		
				6,000	6,000							Travel		
				21,400	21,500							Supplies and Equipment		
												Fellowships		
			13,900	65,800	65,900									
												AMRO-187, Promotion of Community Water Supplies (For text see page 106)		
						1	1	1	11,357	11,420		Water Administration and Finance Specialist, 9300		
						1	1	1	9,055	9,300		Sanitary Engineer, 9442		
						1	1	1	3,725	3,875		Clerk Stenographer, 9387		
									24,137	24,595		Cost of salaries		
									9,085	10,364		Common Staff Costs		
				7,350	7,350				7,000	28,000		Short-term Consultants		
				9,450	9,450				7,000	36,000		Fees		
									9,605	9,605		Travel		
												Duty Travel		
				*16,800	*16,800	3	3	3	34,284	56,827	108,564			
												AMRO-196, Insecticide Testing Teams (For text see page 106)		
						1	1	1	10,845	11,105		Senior Entomologist, 9238		
						2	2	2	16,271	16,688		Entomologist, 9239, 9270		
						1	1	1	6,611	6,801		Assistant Entomologist, 9271		
						1	1	1	5,545	5,734		Auxiliary Entomologist, 9241		
						2						Entomological Aide, 9318, 9319		
						3						Laboratory Assistant, 9320, 9321, 9322		
						1						Secretary, 9325		
						2						Chauffeur, 9323, 9324		
						1						Janitor-Office Boy, 9326		
									39,272	40,328		Cost of salaries		
									26,719	23,606		Common Staff Costs		

\*Special Fund for Health Promotion (See Annex 4).



**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62			63			64			1962			1963			1964		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	16,830	25,078	24,323
															13,900	65,800	65,900
												3	3	3	34,284	73,627	125,364

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-196, (continued)</u>		
										8,070	8,070	Duty Travel		
										7,000	6,000	Supplies and Equipment		
										8,000	7,000	Common Services		
										20,000	20,000	Grant for local employees		
						14	5	5	121,172	109,061	105,004			
												<u>AMRO-197, Research on the Resistance of Anophelines to Insecticides</u> (For text see page 106)		
									20,000			Grant		
												<u>AMRO-198, Administrative Methods and Practices in Public Health</u> (For text see page 106)		
												Chief Administrative Methods Officer, .7072		P5
												Technical Assistant, .7132		WL7
												Cost of salaries		
												Common Staff Costs		
												Duty Travel		
												Supplies and Equipment		
1	1	1		10,780	11,040									
1	1	1		4,455	4,640									
				15,235	15,680									
				5,230	6,453									
				3,544	3,544									
				1,950	1,950									
2	2	2	24,184	25,959	27,627									
												<u>AMRO-220, Malaria Eradication Epidemiology Teams</u> (For text see page 106)		
						1	1	1		11,295	11,540	Senior Epidemiologist, 9302		P5
						1	1	1		9,117	9,360	Medical Officer, 9282		P4
						1						Parasitologist, 9267		P4
						2	2	2		18,234	18,720	Entomologist, 9266, 9283		P4
						1	1	1		4,900	5,095	Auxiliary Entomologist, 9429		P1
										43,546	44,715	Cost of salaries		
										27,157	31,875	Common Staff Costs		
										16,290	16,290	Duty Travel		
										3,600	3,600	Supplies and Equipment		
										7,450	7,650	Common Services		
										40,000	40,000	Grant for local employees		
						6	5	5	140,404	138,043	144,130			
												<u>AMRO-234, Sewage Disposal and Water Pollution Control</u> (For text see page 107)		
				4,900	6,300							Short-term Consultants Fees		
				6,300	8,100							Travel		
					5,600							Duty Travel		
				800								Supplies and Equipment		
			4,800	12,000	20,000									

## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												14	5	5	121,172	109,061	105,004
															20,000		
												2	2	2	24,184	25,959	27,627
												6	5	5	140,404	138,043	144,130
															4,800	12,000	20,000

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS  INTERZONE	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$		
												AMRO-235, Food Sanitation (For text see page 107)	
												Short-term Consultants Fees Travel	
				1,400	1,400							Supplies and Equipment	
				1,800	1,800								
				1,000	800								
				4,200	4,000								
												AMRO-236, Refuse and Garbage Disposal (For text see page 107)	
												Short-term Consultants Fees Travel	
												Duty Travel	
												Fellowships	
												AMRO-240, Seminar on Public Health Nursing Services (For text see page 107)	
												Short-term Consultants Fees Travel	
				1,400	1,400							Participants	
				1,800	1,800							Supplies and Equipment	
				7,646	11,100							Conference Costs	
				1,000	1,000								
				500	500								
				12,346	15,800								
												AMRO-241, Advisory Committee on Statistics (For text see page 107)	
				4,569	9,307							Duty Travel	
												AMRO-242, Seminars on Water Supply Design, Construction, and Management (For text see page 108)	
									30,000			All Purposes	
												AMRO-243, Conference on Development of Water Supplies (For text see page 108)	
									30,000			All Purposes	
												AMRO-247, Teaching of Statistics in Medical Schools (For text see page 108)	
				4,800	5,520	5,520						Duty Travel	



PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$			
			4,800									<u>AMRO-251, Filariasis</u> (For text see page 108)  All Purposes		
1	1	1		2,747	2,841							<u>AMRO-256, Industrial Hygiene</u> (For text see page 108)  Clerk Stenographer, .7129  Common Staff Costs  Short-term Consultants Fees Travel  Participants  Supplies and Equipment  Fellowships  Common Services		BAL6
				307	317									
				1,400	1,400									
				1,800	1,800									
				12,986										
				300										
					17,200									
				800										
1	1	1	5,878	20,340	23,558									
												<u>AMRO-257, Seminar on Dental Education</u> (For text see page 108)  Clerk, 9384  Short-term Consultants Fees Travel  Participants  Supplies and Equipment		WL6
						1	1	1		5,000	5,000			
										1,400	2,800			
										1,800	3,600			
					16,920									
				3,000	2,000									
										700	1,000			
			11,566	3,000	18,920	1	1	1	1/16,015	1/8,900	1/12,400			
												<u>AMRO-261, Advisory Committee on International Classification of Diseases</u> (For text see page 108)  Duty Travel		
				12,726	12,726									
												<u>AMRO-266, Regional Development of Epidemiological Studies</u> (For text see page 109)  Medical Officer, 9373 Statistician, 9381 Clerk Stenographer, 9382  Cost of salaries  Common Staff Costs  Duty Travel  Supplies and Equipment  Investigators  Contractual Services		P4 P2 WL6
						1	1	1		10,585	10,845			
						1	1	1		6,722	6,910			
						1	1	1		4,055	4,215			
										21,362	21,970			
										7,164	10,200			
										3,000	3,000			
										8,700	3,300			
										151,385	45,882			
										39,747	18,210			
						3	3	3	2/226,100	2/231,358	2/102,562			

1/ Grant from the W. K. Kellogg Foundation.

2/ Contribution from the United States Public Health Service - National Institutes of Health.

**WORLD HEALTH ORGANIZATION**

**T O T A L S**

**REGULAR BUDGET**

**TECHNICAL ASSISTANCE FUNDS**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

**NUMBER OF POSTS**

**ESTIMATED EXPENDITURE**

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															4,800		
												1	1	1	5,878	20,340	23,558
												1	1	1	27,581	11,900	31,320
																12,726	12,726
												3	3	3	226,100	231,358	102,562

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS INTERZONE	GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964		
			\$	\$	\$				\$	\$	\$	AMRO-268, <u>Pediatric Education Course</u> (For text see page 109)  All Purposes	
												AMRO-272, <u>Group Study of Medical School Organization</u> (For text see page 109)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment  Contractual Services	
			17,200	*18,476	18,592								
												AMRO-273, <u>Seminar on Mental Health</u> (For text see page 109)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment  Conference Services  Publications	
			17,419	27,638									
			4,000									AMRO-274, <u>Salt Fluoridation</u> (For text see page 109)  All Purposes	
			3,000									AMRO-275, <u>Chagas' Disease</u> (For text see page 109)  All Purposes	
			36,200									AMRO-276, <u>Sewage Treatment and Disposal</u> (For text see page 110)  All Purposes	

\* Special Fund for Health Promotion (See Annex 4).



## WORLD HEALTH ORGANIZATION

## T O T A L S

## REGULAR BUDGET

## TECHNICAL ASSISTANCE FUNDS

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

NUMBER  
OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			1,000												1,000		
															17,200	18,476	18,592
															17,419	27,638	
															4,000		
															3,000		
															36,200		

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	AMRO-277, Manual on School Sanitation (For text see page 110)		
				2,100 2,700 200	2,100 2,700							Short-term Consultants Fees Travel		
			3,200	5,000	4,800							Supplies and Equipment		
			3,200									AMRO-279, Study Group on Water Quality Standards (For text see page 110)		
												All Purposes		
												AMRO-281, Planning (For text see page 110)		
				8,400 10,800 9,194	25,200 32,400 39,620							Short-term Consultants Fees Travel		
			45,668	28,394	97,220				<u>1</u> /39,200			Fellowships		
1	1	1		10,195	10,455	1	1	1		13,100	13,100	AMRO-283, Coordination of Inter- national Research (For text see page 110)		
		1			8,951	1	1			8,186		Medical Officer, 9368 Medical Officer, .7047 Medical Research Scientist, .7143, 9370		
		1			3,900	1	1	1		4,175	4,335	Secretary, 9371 Clerk Stenographer, .7144, 9372		
				10,195	23,306					29,224	17,435	Cost of salaries		
				9,309	11,567					16,718	9,226	Common Staff Costs		
1	1	3	15,223	19,504	34,873	4	4	2	<u>2</u> /115,192	<u>2</u> /45,942	<u>2</u> /26,661			
												AMRO-284, Dental Education (For text see page 111)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Fellowships		

1/ Grant from the Alliance for Progress.2/ Contribution from United States Public Health Service - National Institutes of Health.

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET

TECHNICAL ASSISTANCE FUNDS

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

NUMBER OF POSTS

ESTIMATED EXPENDITURE

62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															3,200	5,000	4,800
															3,200		
															84,868	28,394	97,220
												5	5	5	130,415	65,446	61,534
				1,400	1,400												
				1,800	1,800												
				1,000	1,000												
				7,409	7,409												
				11,609	11,609											11,609	11,609

PAN AMERICAN HEALTH ORGANIZATION											PART III		GRADE	
REGULAR BUDGET						OTHER FUNDS					FIELD AND OTHER PROGRAMS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			INTERZONE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964			
			\$	\$	\$				\$	\$	\$	<u>AMRO-306, Conference on Post Graduate Training in Health Education</u> (For text see page 111)  Short-term Consultants Fees Travel  Participants  Supplies and Equipment  Conference Costs		
			4,773									<u>AMRO-309, Program Evaluation</u> (For text see page 111)  All Purposes		
									6,500			<u>AMRO-310, Study on Production of Biologicals</u> (For text see page 111)  All Purposes		
												<u>AMRO-323, Regional Conference on Environmental Sanitation</u> (For text see page 111)  Short-term Consultants Fees Travel  Duty Travel  Participants  Common Services		
												<u>AMRO-327, Courses in Management of Water Works</u> (For text see page 111)  Short-term Consultants Fees Travel  Supplies and Equipment  Fellowships		
										51,570	49,800			
18	18	21	584,139	843,789	1,065,766	195	201	202	1,586,933	1,635,920	1,715,040	TOTAL - INTERZONE PROGRAMS		

WORLD HEALTH ORGANIZATION												T O T A L S					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
					1,400												
					1,800												
					12,452												
					1,000												
					500												
			16,600		17,152										16,600		17,152
															4,773		
															6,500		
					1,400												
					1,800												
					4,170												
					20,630												
					2,000												
					30,000												30,000
																51,570	49,800
2	1	2	247,668	243,550	321,941	3	3	3	77,825	80,225	80,611	218	223	228	2,496,565	2,803,484	3,183,358

PAN AMERICAN HEALTH ORGANIZATION												PART III		GRADE
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS		
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			SECTION 3		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	EDITORIAL SERVICES AND PUBLICATIONS		
			\$	\$	\$				\$	\$	\$	(For text see page 112)		
												<u>Editorial Services</u>		
1	1	1		11,420	11,420							Medical Officer (Scientific Editor), .290		P4
												<u>Bulletin</u>		
1	1	1		8,598	8,808							Editor, .46		P3
2	2	2		14,040	14,332							Assistant Editor, .47, .48		P2
1	1	1		4,400	4,475							Clerk Typist, .53		WL5
												<u>Special Publications</u>		
1	1	1		6,910	7,092							Editor, 4.45		P3
2	2	2		12,620	12,620							Assistant Editor, .0008		P2
1	1	1		3,938	4,088							Sub-Editor, .49, .50		P1
												Clerk Typist, .232		WL5
												<u>Distribution</u>		
1	1	1		5,925	5,925							Administrative Assistant, .51		WL8
1	1	1		5,550	5,550							Clerk, .137		WL7
												Clerk Operator, 4.291		WL6
				73,401	74,310							Cost of salaries		
				35,259	37,256							Common Staff Costs		
				108,660	111,566							Cost of Staff		
				50,000	50,000							<u>Publications</u>		
				10,000	10,000							PASB Bulletin		
				40,000	45,000							Statistical Publications and Reports		
										10,000	10,000	Special Publications		
												Special Malaria Publications		
11	11	11	208,193	208,660	216,566				10,000	10,000	10,000	TOTAL		
												PART IV		
												SPECIAL FUND FOR HEALTH PROMOTION		
												(For text see page 112)		
			*187,500	*187,500	*187,500							<u>Special Fund for Health Promotion</u>		
												PART V		
												AMOUNT FOR INCREASING THE		
												WORKING CAPITAL FUND		
												(For text see page 112)		
			17,591	300,000	300,000							<u>Amount for Increasing the Working Capital Fund</u>		

\*See text page 112 for explanation of projects which are displayed by country in Part III and listed in Annex 4.

WORLD HEALTH ORGANIZATION												TOTALS					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS											
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
62	63	64	1962	1963	1964	62	63	64	1962	1963	1964	62	63	64	1962	1963	1964
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		11,420	11,420
												1	1	1		8,598	8,808
												2	2	2		14,040	14,332
												1	1	1		4,400	4,475
1	1	1		8,972	9,220							1	1	1		8,972	9,220
												1	1	1		6,910	7,092
												2	2	2		12,620	12,620
												1	1	1		3,938	4,088
1	1	1		4,855	4,855							1	1	1		5,925	5,925
												1	1	1		5,550	5,550
												1	1	1		4,855	4,855
				13,827	14,075											87,228	88,385
				7,684	7,835											42,943	45,091
				21,511	21,910											130,171	133,476
																50,000	50,000
																10,000	10,000
																40,000	45,000
																10,000	10,000
2	2	2	20,768	21,511	21,910							13	13	13	238,961	240,171	248,476
															187,500	187,500	187,500
															17,591	300,000	300,000





## **A N N E X E S**

PAN AMERICAN HEALTH ORGANIZATION						ANNEX 1 SUMMARY OF PROFESSIONAL AND LOCAL PERSONNEL
REGULAR BUDGET			OTHER FUNDS			
NUMBER OF POSTS			NUMBER OF POSTS			
1962	1963	1964	1962	1963	1964	
						PART I <u>PAN AMERICAN HEALTH ORGANIZATION - ORGANIZATIONAL MEETINGS</u>
9 8	9 8	9 8				Professional Local
17	17	17				Total - Part I
						PART II <u>PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS</u>
60 78	62 80	62 83	1 5	4	2	Professional Local
138	142	145	6	4	2	Total - Part II
						PART III <u>PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS</u>
						<u>Zone Offices</u>
29 71	21 57	21 57	1 5	4	4	Professional Local
100	78	78	6	4	4	Total - Zone Offices
						<u>Projects</u>
84 6	95 18	95 20	214 259	223 264	223 261	Professional Local
90	113	115	473	487	484	Total - Projects
						<u>Editorial Services and Publications</u>
7 4	7 4	7 4				Professional Local
11	11	11				Total - Editorial Services and Publications
						<u>Total - Field and Other Programs</u>
120 81	123 79	123 81	215 264	223 268	223 265	Professional Local
201	202	204	479	491	488	Total - Part III
						<u>ALL PARTS</u>
189 167	194 167	194 172	216 269	223 272	223 267	Professional Local
356	361	366	485	495	490	Total - PERSONNEL

WORLD HEALTH ORGANIZATION						TOTALS		
REGULAR BUDGET			TECHNICAL ASSISTANCE FUNDS					
NUMBER OF POSTS			NUMBER OF POSTS			NUMBER OF POSTS		
1962	1963	1964	1962	1963	1964	1962	1963	1964
4	4	4				13	13	13
1	1	1				9	9	9
5	5	5				22	22	22
32	33	33				93	95	95
42	42	44				125	126	129
74	75	77				218	221	224
3	2	2				33	23	23
1						77	61	61
4	2	2				110	84	84
55	61	62	82	91	88	435	470	468
						265	282	281
55	61	62	82	91	88	700	752	749
1	1	1				8	8	8
1	1	1				5	5	5
2	2	2				13	13	13
59	64	65	82	91	88	476	501	499
2	1	1				347	348	347
61	65	66	82	91	88	823	849	846
95	101	102	82	91	88	582	609	606
45	44	46				481	483	485
140	145	148	82	91	88	1,063	1,092	1,092

## ANNEX 2

SCHEDULES OF SALARIESPROFESSIONAL STAFF SALARY SCALEU.S. Dollars (Effective 1 January 1962)

	I	II	III	IV	V	VI	VII	VIII	IX	X	XI	XII
P 1	4,800	5,000	5,190	5,380	5,560	5,750	5,940	6,130	6,310			
P 2	6,130	6,310	6,500	6,690	6,880	7,060	7,250	7,460	7,670	7,880		
P 3	7,460	7,670	7,880	8,090	8,300	8,510	8,720	8,930	9,180	9,420	9,640	9,870
P 4	8,930	9,180	9,420	9,640	9,870	10,130	10,390	10,650	10,910	11,170	11,420	
P 5	10,650	10,910	11,170	11,420	11,660	11,950	12,240	12,520	12,810	13,100		
P 6)												
D 1)	12,080	12,500	12,920	13,340	13,760	14,140	14,530					
D 2	14,530	15,020	15,520									

ANNUAL LOCAL WAGE SCALE - WASHINGTONU.S. Dollars (Effective 1 August 1960)

	I	II	III	IV	V	VI	VII	Extra Step Bilingual Staff
WL 1	2,425	2,525	2,625	2,725	2,825	2,925	3,025	3,125
WL 2	2,595	2,695	2,795	2,895	2,995	3,095	3,195	3,295
WL 3	2,935	3,040	3,145	3,250	3,355	3,460	3,565	3,670
WL 4	3,285	3,415	3,545	3,675	3,805	3,935	4,065	4,195
WL 5	3,575	3,725	3,875	4,025	4,175	4,325	4,475	4,625
WL 6	3,895	4,055	4,215	4,375	4,535	4,695	4,855	5,015
WL 7	4,255	4,440	4,625	4,810	4,995	5,180	5,365	5,550
WL 8	4,695	4,900	5,105	5,310	5,515	5,720	5,925	6,130

ANNUAL LOCAL WAGE SCALE - EL PASOU.S. Dollars (Effective 1 May 1961)

	I	II	III	IV	V	VI	VII	Extra Step Bilingual Staff
EPL 1	2,750	2,810	2,870	2,930	2,990	3,050	3,110	3,170
EPL 2	3,000	3,080	3,160	3,240	3,320	3,400	3,480	3,560
EPL 3	3,400	3,500	3,600	3,700	3,800	3,900	4,000	4,100

ANNUAL LOCAL WAGE SCALE - ZONE I (CARACAS)Venezuelan Bolivares (Effective 1 June 1959)

	I	II	III	IV	V	VI	VII	VIII	Extra Step Bilingual Staff
CL 1	4,200	4,400	4,600	4,800	5,000	5,200	5,400	5,600	5,800
CL 2	7,200	7,550	7,900	8,250	8,600	8,950	9,300	9,650	10,000
CL 3	13,000	13,640	14,280	14,920	15,560	16,200	16,840	17,480	18,120
CL 4	16,000	16,780	17,560	18,340	19,120	19,900	20,680	21,460	22,240
CL 5	21,000	22,000	23,000	24,000	25,000	26,000	27,000	28,000	29,000
CL 6	24,000	25,200	26,400	27,600	28,800	30,000	31,200	32,400	33,600

ANNUAL LOCAL WAGE SCALE - ZONE II (MEXICO)Mexican Pesos (Effective 1 April 1960)

	I	II	III	IV	V	VI	VII	VIII	IX	Extra Step Bilingual Staff
ML 1	12,900	13,500	14,100	14,700	15,300	15,900	16,500	17,100	17,700	18,300
ML 2	16,200	16,800	17,400	18,000	18,600	19,200	19,800	20,400	21,000	21,600
ML 3	17,400	18,200	19,000	19,800	20,600	21,400	22,200	23,000	23,800	24,600
ML 4	21,400	22,400	23,400	24,400	25,400	26,400	27,400	28,400	29,400	30,400
ML 5	27,200	28,400	29,600	30,800	32,000	33,200	34,400	35,600	36,800	38,000
ML 6	33,400	34,800	36,200	37,600	39,000	40,400	41,800	43,200	44,600	46,000
ML 7	41,000	42,600	44,200	45,800	47,400	49,000	50,600	52,200	53,800	55,400
ML 8	48,000	49,900	51,800	53,700	55,600	57,500	59,400	61,300	63,200	65,100

## SCHEDULES OF SALARIES (continued)

ANNUAL LOCAL WAGE SCALE - ZONE III (GUATEMALA)  
Guatemalan Quetzales (Effective 1 June 1961)

	I	II	III	IV	V	VI	VII	VIII	Extra Step Bilingual Staff
GL 1	960	1,010	1,060	1,110	1,160	1,210	1,260	1,310	1,360
GL 2	1,160	1,225	1,290	1,355	1,420	1,485	1,550	1,615	1,680
GL 3	1,490	1,575	1,660	1,745	1,830	1,915	2,000	2,085	2,170
GL 4	1,730	1,830	1,930	2,030	2,130	2,230	2,330	2,430	2,530
GL 5	2,250	2,380	2,510	2,640	2,770	2,900	3,030	3,160	3,290
GL 6	2,500	2,640	2,780	2,920	3,060	3,200	3,340	3,480	3,620
GL 7	3,060	3,235	3,410	3,585	3,760	3,935	4,110	4,285	4,460
GL 8	3,310	3,500	3,690	3,880	4,070	4,260	4,450	4,640	4,830

ANNUAL LOCAL WAGE SCALE - ZONE IV (LIMA)  
Peruvian Soles (Effective 1 December 1961)

	I	II	III	IV	V	VI	VII	VIII	Extra Step Bilingual Staff
LL 1	19,800	20,790	21,780	22,770	23,760	24,750	25,740	26,730	27,720
LL 2	26,400	27,720	29,040	30,360	31,680	33,000	34,320	35,640	36,960
LL 3	39,600	41,580	43,560	45,540	47,520	49,500	51,480	53,460	55,440
LL 4	49,500	52,140	54,780	57,420	60,060	62,700	65,340	67,980	70,620
LL 5	59,400	62,370	65,340	68,310	71,280	74,250	77,220	80,190	83,160
LL 6	76,560	80,520	84,480	88,440	92,400	96,360	100,320	104,280	108,240
LL 7	92,400	97,020	101,640	106,260	110,880	115,500	120,120	124,740	129,360

ANNUAL LOCAL WAGE SCALE - ZONE V (RIO DE JANEIRO)  
Brazilian Cruzeiros (Effective 1 November 1961)

	I	II	III	IV	V	VI	VII	VIII	IX	X	Extra Step Bilingual Staff
RL 1	168,000	176,580	185,160	193,740	202,320	210,900	219,480	228,060	236,640	245,220	253,800
RL 2	212,400	222,000	231,600	241,200	250,800	260,400	270,000	279,600	289,200	298,800	308,400
RL 3	312,000	327,600	343,200	358,800	374,400	390,000	405,600	421,200	436,800	452,400	468,000
RL 4	444,000	462,900	481,800	500,700	519,600	538,500	557,400	576,300	595,200	614,100	633,000
RL 5	540,000	561,000	582,000	603,000	624,000	645,000	666,000	687,000	708,000	729,000	750,000
RL 6	612,000	633,000	654,000	675,000	696,000	717,000	738,000	759,000	780,000	801,000	822,000
a/RL 7	616,200	634,200	652,200	670,200	688,200	706,200	724,200	742,200	760,200	778,200	796,200
a/RL 8	681,400	702,000	722,600	743,200	763,800	784,400	805,000	825,600	846,200	866,800	887,400
a/RL 9	765,600	788,400	811,200	834,000	856,800	879,600	902,400	925,200	948,000	970,800	993,600
a/RL 10	844,800	868,800	892,800	916,800	940,800	964,800	988,800	1,012,800	1,036,800	1,060,800	1,084,800

ANNUAL LOCAL WAGE SCALE - ZONE VI (BUENOS AIRES)  
Argentine Pesos (Effective 1 November 1961)

	I	II	III	IV	V	VI	VII	VIII	IX	Extra Step Bilingual Staff
BAL 1	84,000	87,500	91,000	94,500	98,000	101,500	105,000	108,500	112,000	115,500
BAL 2	112,000	116,500	121,000	125,500	130,000	134,500	139,000	143,500	148,000	152,500
BAL 3	148,000	154,000	160,000	166,000	172,000	178,000	184,000	190,000	196,000	202,000
BAL 4	203,000	210,700	218,400	226,100	233,800	241,500	249,200	256,900	264,600	272,300
BAL 5	234,000	243,300	252,600	261,900	271,200	280,500	289,800	299,100	308,400	317,700
BAL 6	296,000	306,000	316,000	326,000	336,000	346,000	356,000	366,000	376,000	386,000
BAL 7	358,800	369,700	380,600	391,500	402,400	413,300	424,200	435,100	446,000	456,900

a/ Applicable only to local staff in project AMRO-77.

ANNEX 3  
PAN AMERICAN HEALTH ORGANIZATION  
OTHER FUNDS

Analysis of amounts appearing in the Other Funds column of the  
schedules: a) by source of fund, and b) by Part and Section of  
the budget in which these amounts are displayed.

	<u>1962</u>	<u>1963</u>	<u>1964</u>
	\$	\$	\$
<b>a) By Source of Fund</b>			
Alliance for Progress	39,200	-	-
American Cyanamid Company	19,900	32,196	18,062
Community Water Supply Fund	362,715	522,199	618,242
Government of Argentina (Zoonoses Center)	101,322	108,694	108,669
Government of Venezuela (Zone I Office)	53,000	53,000	53,000
INCAP - Regular Budget	105,000	105,000	105,000
INCAP - Grants and Other Contributions	523,767	692,620	723,231
Inter-American Development Bank	16,120	-	-
Interdepartmental Committee on Nutrition for National Defense	6,983	-	-
Organization of American States - Technical Cooperation Program	537,808	670,000	852,330
Special Malaria Fund	3,107,296	3,290,901	3,634,909
United Nations Children's Fund	3,669	-	-
U.S.P.H.S. - National Institutes of Health	390,482	327,528	179,315
W. K. Kellogg Foundation	<u>67,972</u>	<u>31,035</u>	<u>12,400</u>
	<u>5,335,234</u>	<u>5,833,173</u>	<u>6,305,158</u>
<b>b) By Part and Section of the Budget</b>			
Part II Pan American Health Organization - Headquarters - Community Water Supply Fund - Special Malaria Fund	4,496 <u>31,534</u> <u>36,030</u>	7,515 <u>14,227</u> <u>21,742</u>	7,692 <u>4,308</u> <u>12,000</u>
Part III Pan American Health Organization - Field and Other Programs			
Sect. 1 Zone Offices - Special Malaria Fund Government of Venezuela (Zone I Office)	21,945 53,000	17,537 53,000	18,229 53,000
Total - Sect. 1	<u>74,945</u>	<u>70,537</u>	<u>71,229</u>
Sect. 2 Programs -			
Alliance for Progress	39,200	-	-
American Cyanamid Company	19,900	32,196	18,062
Community Water Supply Fund	358,219	514,684	610,550
Government of Argentina (Zoonoses Center)	101,322	108,694	108,669
INCAP - Regular Budget	105,000	105,000	105,000
INCAP - Grants and Other Contributions	523,767	692,620	723,231
Inter-American Development Bank	16,120	-	-
Interdepartmental Committee on Nutrition for National Defense	6,983	-	-
Organization of American States - Technical Cooperation Program	537,808	670,000	852,330
Special Malaria Fund	3,043,817	3,249,137	3,602,372
United Nations Children's Fund	3,669	-	-
U.S.P.H.S. - National Institutes of Health	390,482	327,528	179,315
W. K. Kellogg Foundation	<u>67,972</u>	<u>31,035</u>	<u>12,400</u>
Total - Sect. 2	<u>5,214,259</u>	<u>5,730,894</u>	<u>6,211,929</u>
Sect. 3 Editorial Services and Publications - Special Malaria Fund	<u>10,000</u>	<u>10,000</u>	<u>10,000</u>
Total - Part III	<u>5,299,204</u>	<u>5,811,431</u>	<u>6,293,158</u>
Total - All Parts	<u>5,335,234</u>	<u>5,833,173</u>	<u>6,305,158</u>

## ANNEX 4

## SPECIAL FUND FOR HEALTH PROMOTION

As indicated in the narrative for Part IV, Pan American Health Organization - Special Fund for Health Promotion, this Annex lists all projects comprising the Special Fund, details of which may be found by reference to the Index of Projects. Individual projects are footnoted throughout this document.

All figures represent the complete project unless indicated as "partial".

<u>Project</u>	<u>1963</u>	<u>1964</u>
	\$	\$
<u>COMMUNITY WATER SUPPLIES</u>		
AMRO-187, Promotion of Community Water Supplies	16,800	16,800
<u>NUTRITION</u>		
AMRO-165, Nutrition Advisory Services (Interzone)	37,477	75,854
<u>EDUCATION AND TRAINING</u>		
AMRO-35, Fellowships for Health Services, (Partial)	48,863	24,775
AMRO-72, Dental Health	23,000	24,880
AMRO-210, Medical Education (Zone VI)	16,685	18,122
AMRO-237, Medical Education (Zone III)	26,199	27,069
AMRO-272, Group Study of Medical School Organization	18,476	--
TOTAL	<u>187,500</u>	<u>187,500</u>

## ANNEX 5

PROJECTS DESIRED BY GOVERNMENTS AND NOT INCLUDED WITHIN PAHO/WHO PROGRAM  
AND BUDGET ESTIMATES FOR 1964, INCLUDING TECHNICAL ASSISTANCE CATEGORY II  
PROGRAMS, DISPLAYED BY SUBJECT AND MAJOR EXPENSE ITEM

	<u>Personnel Costs</u>	<u>Supplies and Equipment</u>	<u>Fellowships</u>	<u>Other</u>	<u>Total</u>
	\$	\$	\$	\$	\$
<u>TUBERCULOSIS</u>					
* Argentina-20, Tuberculosis Control	16,379		7,800		24,179
Cuba-15, Tuberculosis Control	4,800				4,800
* AMRO-110, Tuberculosis Prevention	8,000		17,200		25,200
Subtotal	29,179		25,000		54,179
<u>BACTERIAL DISEASES</u>					
* Venezuela-11, Plague Investigation	4,800				4,800
Subtotal	4,800				4,800
<u>PARASITIC DISEASES</u>					
* AMRO-155, Schistosomiasis Control	3,200		12,770	1,200	17,170
AMRO-251, Filariasis	12,800			1,300	14,100
AMRO-275, Chagas' Disease	4,800	4,600	3,515		12,915
Subtotal	20,800	4,600	16,285	2,500	44,185
<u>VIRUS DISEASES</u>					
* Venezuela-39, Pneumonias	4,800				4,800
AMRO-61, Rabies Control	6,400	6,000	2,910		15,310
Subtotal	11,200	6,000	2,910		20,110
<u>LEPROSY</u>					
* Brazil-48, Leprosy Control			8,600		8,600
* AMRO-149, Leprosy Control	2,200	1,600	29,065		32,865
* AMRO-263, Leprosy Control (Zone IV)	17,104				17,104
* AMRO-305, Leprosy Control (Zone VI)			6,000		6,000
Subtotal	19,304	1,600	43,665		64,569
<u>PUBLIC HEALTH ADMINISTRATION</u>					
* Argentina-4, National Institute of Microbiology	15,185				15,185
* Argentina-35, Public Health Services (San Juan)	8,000				8,000
* Bolivia-10, National Health Services	16,135				16,135
* Bolivia-11, Joint Field Mission on Indigenous Populations			21,500		21,500
* Brazil-3, Health Services in Nine Northeast States	15,065				15,065



	Personnel	Supplies	Fellowships	Other	Total
	Costs	and Equipment			
	\$	\$	\$	\$	\$
<u>PUBLIC HEALTH ADMINISTRATION (continued)</u>					
* Brazil-19, School of Public Health in Rio de Janeiro			4,300		4,300
* Brazil-201, Fellowships for Health Services			17,200		17,200
* British Guiana-10, National Health Services			4,300		4,300
British Guiana and West Indies-9, Fellowships for Health Services			21,500		21,500
* Chile-26, Fellowships for Health Services			4,300		4,300
Chile-27, Health Services (Ovalle-Copiapo)	6,400				6,400
* Chile-31, School of Public Health			3,000		3,000
Chile-43, Administrative Methods and Practices in Public Health	6,400				6,400
* Chile-49, Health Services			21,500		21,500
Chile-53, Assistance to Santiago Health Zone	19,276				19,276
* Colombia-4, National Health Services			43,000		43,000
Colombia-200, Fellowships for Health Services			4,300		4,300
* Cuba-3, Public Health Services	11,815		21,500		33,315
* Cuba-6, Fellowships for Health Services			8,600		8,600
* Dominican Republic-4, Public Health Services	15,840				15,840
Dominican Republic-201, Fellowships for Health Services			8,600		8,600
* Ecuador-4, National Health Services			8,600		8,600
* Ecuador-11, National Institute of Health	9,617				9,617
Ecuador-23, Planning	17,522				17,522
* El Salvador-19, National Health Services			17,200		17,200
French Antilles and Guiana-201, Fellowships for Health Services			4,300		4,300
Guatemala-201, Fellowships for Health Services			21,500		21,500
* Haiti-12, Fellowships for Health Services			4,300		4,300
* Haiti-16, National Health Services	13,621		21,500		35,121
* Honduras-4, National Health Services			21,500		21,500
* Mexico-15, State Health Services	34,869				34,869
* Mexico-28, Public Health Laboratory	7,200		4,300		11,500
* Mexico-34, Teaching of Public Health in Schools of Veterinary Medicine	14,471	1,500	6,300		22,271
Mexico-201, Fellowships for Health Services			21,500		21,500
* Panama-1, National Health Services			21,500		21,500
* Paraguay-10, Health Services	16,000		72,800		88,800
* Peru-22, National Health Services			43,000		43,000
Surinam and Netherlands Antilles-201, Fellowships for Health Services			8,600		8,600
* Uruguay-5, National Health Services	9,600		32,100		41,700
Venezuela-201, Fellowships for Health Services			21,500		21,500
AMRO-29, Social Sciences in Public Health	17,984	1,000	37,424	500	56,908
* AMRO-45, Laboratory Services	14,400				14,400
* AMRO-76, Vaccine Production and Testing	4,800				4,800
AMRO-106, Seminar on Integrated Health Services	4,800	1,000	37,700	500	44,000
* AMRO-148, Laboratory for Production of Biologicals (Zone III)		8,000	4,300		12,300
* AMRO-150, Food and Drug Services	6,400		19,800		26,200
* AMRO-198, Administrative Methods and Practices in Public Health	95,576		34,000		129,576
AMRO-258, Seminar on Veterinary Public Health	9,620	500	14,880	1,000	26,000
Subtotal	390,596	12,000	662,204	2,000	1,066,800
<u>VITAL AND HEALTH STATISTICS</u>					
* AMRO-10, Program for Biostatistics Education			24,000		24,000
* AMRO-156, Training Program in Hospital Statistics	17,832		17,270		35,102
* AMRO-247, Teaching of Statistics in Medical Schools			23,780		23,780
Subtotal	17,832		65,050		82,882

	Personnel Costs	Supplies and Equipment	Fellowships	Other	Total
	\$	\$	\$	\$	\$
<u>DENTAL HEALTH</u>					
Colombia-27, Teaching of Preventive Dentistry	4,800	5,000	6,300		16,100
* AMRO-72, Dental Health	1,600	1,500	17,819		20,919
AMRO-274, Salt Fluoridation	3,200	3,000			6,200
* AMRO-284, Dental Education	1,600	1,000	4,590		7,190
Subtotal	11,200	10,500	28,709		50,409
<u>NURSING</u>					
* Argentina-3, Nursing Education		4,500	35,100		39,600
* Argentina-25, Training of Nursing Personnel	13,035				13,035
Argentina-37, National Nursing Services	11,641		2,500		14,141
Chile-34, Training of Auxiliary Nursing Personnel			4,300		4,300
* Chile-41, National Planning for Nursing			10,300		10,300
* Costa Rica-18, Advanced Nursing Education			4,300		4,300
* Cuba-4, Nursing Education	12,800		4,300		17,100
* Nicaragua-5, Nursing Education	15,720		4,300		20,020
Uruguay-22, Nursing in Progressive Hospital Care	13,135				13,135
* West Indies-12, Nursing Education			4,300		4,300
AMRO-100, Courses in Nursing Supervision	11,900	1,000	45,280		58,180
AMRO-245, Training Course on Nursing Supervision and Administration (Zone I)	12,800	1,000	31,395		45,195
Subtotal	91,031	6,500	146,075		243,606
<u>SOCIAL AND OCCUPATIONAL HEALTH</u>					
* Chile-21, Rehabilitation Center		3,000	18,600		21,600
Uruguay-21, Rehabilitation			12,800		12,800
Subtotal		3,000	31,400		34,400
<u>HEALTH EDUCATION</u>					
Chile-51, Health Education in Primary Schools			6,300		6,300
Uruguay-20, Community Development in Rural Areas	14,414		4,300		18,714
* AMRO-112, Community Development Training Center	12,800	1,200	24,840	500	39,340
* AMRO-306, Conference on Postgraduate Training in Health Education	3,200		6,278		9,478
Subtotal	30,414	1,200	41,718	500	73,832
<u>MATERNAL AND CHILD HEALTH</u>					
* Argentina-33, Maternal and Child Health	16,159				16,159
* AMRO-94, Diarrheal Diseases in Childhood	3,200	1,000	7,856	500	12,556
* AMRO-183, Nursing Midwifery	14,173		8,600		22,773
Subtotal	33,532	1,000	16,456	500	51,488

	Personnel Costs	Supplies and Equipment	Fellowships	Other	Total
	\$	\$	\$	\$	\$
<u>MENTAL HEALTH</u>					
* Argentina-27, Mental Health	3,200	1,000			4,200
AMRO-273, Seminar on Mental Health	88,784	5,000			93,784
Subtotal	91,984	6,000			97,984
<u>NUTRITION</u>					
* Mexico-23, Nutrition			9,500		9,500
* AMRO-165, Nutrition Advisory Services (Interzone)	15,200		13,650		28,850
AMRO-286, Development of New Sources of Protein	20,199				20,199
Subtotal	35,399		23,150		58,549
<u>RADIATION AND ISOTOPES</u>					
* AMRO-142, Health Aspects of Radiation	19,800		89,739		109,539
Subtotal	19,800		89,739		109,539
<u>ENVIRONMENTAL HEALTH</u>					
British Guiana and West Indies-1, <u>Aedes aegypti</u> Eradication		5,300			5,300
* Costa Rica-22, Promotion of Community Water Supplies	3,200		3,700		6,900
Cuba-10, Promotion of Community Water Supplies	21,045				21,045
* El Salvador-14, Promotion of Community Water Supplies	3,200		3,150		6,350
* French Antilles and Guiana-2, <u>Aedes aegypti</u> Eradication		1,400			1,400
* Guatemala-17, Promotion of Community Water Supplies			3,200		3,200
* Haiti-22, Promotion of Community Water Supplies	6,800				6,800
* Honduras-9, Promotion of Community Water Supplies	3,200		4,300		7,500
* Mexico-39, Promotion of Community Water Supplies	5,600				5,600
* Nicaragua-10, Promotion of Community Water Supplies	3,200		2,600		5,800
* Peru-30, Promotion of Community Water Supplies			8,600		8,600
* Venezuela-27, Promotion of Community Water Supplies	4,800				4,800
Venezuela-30, Water Pollution Control	3,200				3,200
AMRO-2, Meat Hygiene	9,600	300	8,600		18,500
* AMRO-187, Promotion of Community Water Supplies		7,500	37,200		44,700
* AMRO-206, Sanitary Engineering (Zone III)			6,300		6,300
AMRO-254, Milk Hygiene	12,800		7,040		19,840
AMRO-255, Air Pollution	3,200	200			3,400
AMRO-279, Study Group on Water Quality Standards	3,200				3,200
Subtotal	83,045	14,700	84,690		182,435

	<u>Personnel Costs</u>	<u>Supplies and Equipment</u>	<u>Fellowships</u>	<u>Other</u>	<u>Total</u>
	\$	\$	\$	\$	\$
<u>EDUCATION AND TRAINING</u>					
Argentina-18, Medical Education	4,800		10,300		15,100
* Chile-37, Medical Education	6,400		7,700		14,100
* Haiti-19, Medical Education	14,291				14,291
* Venezuela-17, Medical Education	11,141				11,141
* AMRO-18, Medical Education			4,300		4,300
* AMRO-101, Course for Medical Librarians			7,270		7,270
* AMRO-328, Assistance to National Associations of Medical Schools	6,400	3,600			10,000
AMRO-329, Seminar on Obstetrics Education	6,400		15,698		22,098
Subtotal	49,432	3,600	45,268		98,300
<u>OTHER PROJECTS</u>					
* AMRO-81, Pan American Zoonoses Center	33,299				33,299
Subtotal	33,299				33,299
<u>TOTAL</u>	972,847	70,700	1,322,319	5,500	2,371,366

\* Indicates portions of projects in excess of amounts budgeted.

## ANNEX 6

## OTHER EXTRA - BUDGETARY FUNDS

INTERNATIONAL HEALTH ACTIVITIES FOR WHICH THE FUNDS PROPOSED  
ARE NOT ADMINISTERED BY PAHO/WHO

In the following table estimates are presented to reflect the measure of participation in joint international health activities expected to be provided from other sources.

<u>Country</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
	<u>\$</u>	<u>\$</u>	<u>\$</u>
<u>ARGENTINA</u>	<u>413,000</u>	<u>274,000</u>	<u>350,000</u>
Argentina-7, Health Services	260,000*	( 46,000*	200,000
Argentina-8, Malaria Eradication	69,000*	(154,000	50,000
Argentina-20, Tuberculosis Control	84,000*	44,000*	100,000
		30,000	
<u>BOLIVIA</u>	<u>221,000</u>	<u>216,000</u>	<u>140,000</u>
Bolivia-4, Malaria Eradication	100,000*	110,000	90,000
Bolivia-7, Tuberculosis Control	-	66,000*	-
Bolivia-10, National Health Services	45,000*	20,000	50,000
Bolivia-11, Joint Field Mission on Indigenous Populations	26,000*	20,000*	-
Bolivia-17, Nutrition	50,000*	-	-
<u>BRAZIL</u>	<u>1,440,000</u>	<u>920,000</u>	<u>975,000</u>
Brazil-3, Health Services in Nine Northeast States	1,300,000*	800,000	800,000
Brazil-7, Nutrition (Rio Grande do Norte)	100,000*	100,000	100,000
Brazil-55, Tuberculosis Prevalence Survey	40,000*	20,000	75,000
<u>BRITISH HONDURAS</u>	<u>89,000</u>	<u>68,000</u>	<u>13,000</u>
British Honduras-1, Malaria Eradication	39,000*	18,000	13,000
British Honduras-5, Health Services	50,000*	50,000	-
<u>CHILE</u>	<u>476,000</u>	<u>545,000</u>	<u>650,000</u>
Chile-10, Tuberculosis Control	-	-	100,000
Chile-35, Nutrition	15,000*	-	100,000
Chile-49, Health Services	375,000*	545,000	450,000
Chile-51, Health Education in Primary Schools	86,000*	-	-
<u>COLOMBIA</u>	<u>714,000</u>	<u>867,000</u>	<u>710,000</u>
Colombia-4, National Health Services	250,000*	(170,000*	200,000
Colombia-5, Malaria Eradication	330,000*	( 75,000	360,000
Colombia-15, Tuberculosis Control	30,000*	360,000*	-
Colombia-26, Nutrition	104,000*	22,000*	150,000
Colombia-29, Health Teaching in Schools	-	150,000	90,000
		90,000	

\* Represents funds for health projects approved by UNICEF Executive Board. Figures without asterisk represent amounts planned to be made available for future project requests.

<u>Country</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
	<u>\$</u>	<u>\$</u>	<u>\$</u>
<u>COSTA RICA</u>	<u>100,000</u>	<u>169,000</u>	<u>90,000</u>
Costa Rica-2, Malaria Eradication	80,000*	44,000*	40,000
Costa Rica-14, National Health Services	-	50,000	50,000
Costa Rica-21, Nutrition	20,000*	75,000	-
<u>DOMINICAN REPUBLIC</u>	<u>345,000</u>	<u>317,000</u>	<u>150,000</u>
Dominican Republic-2, Malaria Eradication	250,000*	100,000	100,000
Dominican Republic-4, Public Health Services	95,000*	( 53,000* 52,000	50,000
Dominican Republic-10, Tuberculosis Control	-	62,000*	-
Dominican Republic-17, Nutrition	-	50,000	-
<u>ECUADOR</u>	<u>360,000</u>	<u>518,000</u>	<u>300,000</u>
Ecuador-4, National Health Services	10,000*	100,000	-
Ecuador-14, Malaria Eradication	350,000*	350,000	300,000
Ecuador-18, Leprosy Control	-	28,000	-
Ecuador-53, Nutrition	-	40,000	-
<u>EL SALVADOR</u>	<u>285,000</u>	<u>450,000</u>	<u>350,000</u>
El Salvador-1, Tuberculosis Control	-	-	100,000
El Salvador-2, Malaria Eradication	250,000*	250,000	250,000
El Salvador-16, Nutrition	35,000*	100,000	-
El Salvador-19, National Health Services	-	100,000	-
<u>GUATEMALA</u>	<u>483,000</u>	<u>277,000</u>	<u>200,000</u>
Guatemala-1, Malaria Eradication	339,000*	197,000*	100,000
Guatemala-8, National Health Services	118,000*	60,000	100,000
Guatemala-13, Nutrition	26,000*	20,000	-
<u>HAITI</u>	<u>457,000</u>	<u>370,000</u>	<u>460,000</u>
Haiti-4, Malaria Eradication	375,000*	370,000	370,000
Haiti-16, National Health Services	75,000*	-	50,000
Haiti-20, Nutrition	7,000*	-	40,000
<u>HONDURAS</u>	<u>221,000</u>	<u>370,000</u>	<u>218,000</u>
Honduras-1, Malaria Eradication	221,000*	218,000	218,000
Honduras-5, Tuberculosis Control	-	85,000	-
Honduras-51, Nutrition	-	67,000*	-
<u>MEXICO</u>	<u>1,952,000</u>	<u>1,589,000</u>	<u>840,000</u>
Mexico-15, State Health Services	800,000*	365,000	420,000
Mexico-23, Nutrition	-	164,000	-
Mexico-28, Public Health Laboratory	-	300,000	-
Mexico-29, Leprosy Control	55,000*	-	20,000
Mexico-38, Tuberculosis Control	-	60,000	-
Mexico-41, Urban Development	247,000*	200,000	200,000
Mexico-53, Malaria Eradication	850,000*	500,000	200,000
<u>NICARAGUA</u>	<u>226,000</u>	<u>283,000</u>	<u>200,000</u>
Nicaragua-1, Malaria Eradication	226,000*	208,000*	200,000
Nicaragua-4, Nutrition	-	75,000	-

\* Represents funds for health projects approved by UNICEF Executive Board. Figures without asterisk represent amounts planned to be made available for future project requests.

<u>Country</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
	\$	\$	\$
<u>PANAMA</u>	<u>468,000</u>	<u>399,000</u>	<u>255,000</u>
Panama-1, National Health Services	247,000*	100,000	100,000
Panama-2, Malaria Eradication	181,000*	155,000	155,000
Panama-11, Nutrition	40,000*	68,000*	-
Panama-14, Tuberculosis Control	-	( 34,000*	-
		( 42,000	
<u>PARAGUAY</u>	<u>270,000</u>	<u>261,000</u>	<u>162,000</u>
Paraguay-2, Tuberculosis Control	-	45,000	-
Paraguay-10, Health Services	200,000*	75,000	75,000
Paraguay-18, Nutrition	70,000*	71,000*	60,000
Paraguay-20, Maternal and Child Health and Social Services Training	-	70,000	27,000
<u>PERU</u>	<u>865,000</u>	<u>648,000</u>	<u>545,000</u>
Peru-5, Malaria Eradication	330,000*	248,000*	245,000
Peru-22, National Health Services	400,000*	300,000	300,000
Peru-27, Nutrition	100,000*	100,000	-
Peru-29, Tuberculosis Control	35,000*	-	-
<u>SURINAM</u>	<u>18,000</u>	<u>50,000</u>	<u>20,000</u>
Surinam-1, Malaria Eradication	18,000*	20,000	20,000
Surinam-6, Nutrition	-	30,000	-
<u>UNITED KINGDOM</u>	<u>228,000</u>	<u>232,000</u>	<u>48,000</u>
<u>British Guiana</u>			
British Guiana-5, Malaria Eradication	8,000*	10,000*	5,000
British Guiana-9, Nutrition	30,000*	10,000*	20,000
British Guiana-10, National Health Services	100,000*	-	20,000
<u>Jamaica</u>			
Jamaica-2, Malaria Eradication	12,000*	-	-
Jamaica-14, Nutrition	-	75,000	-
<u>Trinidad</u>			
Trinidad-8, Health Services	-	20,000	-
Trinidad-9, Nutrition	75,000*	-	-
<u>West Indies</u>			
West Indies-22 (Dominica), Nutrition	-	10,000	-
West Indies-22 (St. Kitts), Nutrition	-	17,000*	-
West Indies-22 (St. Lucia), Nutrition	-	19,000*	-
West Indies-22 (St. Vincent), Nutrition	-	10,000	-
West Indies-27 (Barbados), Health Services	-	18,000	-
West Indies-27 (Dominica), Health Services	-	20,000	-
West Indies-27 (Montserrat), Health Services	-	20,000	-

\* Represents funds for health projects approved by UNICEF Executive Board. Figures without asterisk represent amounts planned to be made available for future project requests.

<u>Country</u>	<u>1962</u>	<u>1963</u>	<u>1964</u>
	\$	\$	\$
<u>UNITED KINGDOM (continued)</u>			
<u>Windward Islands</u>			
Windward Islands-2 (Dominica), Malaria Eradication	3,000*	3,000	3,000
<u>URUGUAY</u>			
Uruguay-5, National Health Services	150,000*	75,000	75,000
Uruguay-23, Leprosy Control	-	30,000	-
<u>VENEZUELA</u>			
Venezuela-41, National Health Services	-	250,000	250,000
<u>INTERCOUNTRY PROJECTS</u>			
AMRO-54, INCAP - Nutrition Training	141,000	21,000	21,000
AMRO-95, Environmental Sanitation (Caribbean)	58,000*	21,000*	21,000*
AMRO-326, Nutrition Course for Social Workers	37,000*	-	-
AMRO-330, Seminars on Infant Malnutrition	40,000*	-	-
	6,000*	-	-
TOTAL	9,922,000	9,199,000	7,022,000

\* Represents funds for health projects approved by UNICEF Executive Board. Figures without asterisk represent amounts planned to be made available for future project requests.