

PAN AMERICAN HEALTH ORGANIZATION

Official Documents

No. 28

July, 1959

ADDEP

PROPOSED PROGRAM AND BUDGET ESTIMATES

PAN AMERICAN HEALTH ORGANIZATION, 1960

WORLD HEALTH ORGANIZATION, REGION OF THE AMERICAS, 1961

PAN AMERICAN HEALTH ORGANIZATION, PROVISIONAL DRAFT, 1961



Pan American Sanitary Bureau
Regional Office of the World Health Organization
1501 New Hampshire Avenue, N. W.
Washington 6, D. C., U. S. A.

PAN AMERICAN SANITARY BUREAU

OFFICIAL DOCUMENTS

TABLE OF CONTENTS

Proposed Program and Budget Estimates, 1960, 1961	Nº 28
Proyectos de Programa y Presupuesto, 1960, 1961	Nº 28
Financial Report of the Director, and Report of the External Auditor, 1 January-31 December 1958	Nº 29
Informe Financiero del Director en Informe del Auditor Externo, 1 enero-31 diciembre 1958	Nº 29
Annual Report of the Director 1958	Nº 30
Informe Anual del Director 1958	Nº 30

INDEXED

PROPOSED PROGRAM AND BUDGET ESTIMATES

PAN AMERICAN HEALTH ORGANIZATION, 1960

WORLD HEALTH ORGANIZATION, REGION OF THE AMERICAS, 1961

PAN AMERICAN HEALTH ORGANIZATION, PROVISIONAL DRAFT, 1961



**Pan American Sanitary Bureau
Regional Office of the World Health Organization
1501 New Hampshire Avenue, N. W.
Washington 6, D. C., U. S. A.**

RA
10
.A6
03
ms. 28-30

12307

ABBREVIATIONS

AMRO	The Americas Regional Office (Regional symbol for Intercountry and Interzone Projects)
BCG	Bacillus Calmette-Guerin
COMEP	Coordination Office for Malaria Eradication Program
CREPAL	Centro Regional de Educación Fundamental para la América Latina
DDT	Dichlorodiphenyltrichloroethane
FAO	Food and Agriculture Organization
ICA	International Cooperation Administration
ILO	International Labour Organisation
INCAP	Institute of Nutrition of Central America and Panama
MCH	Maternal and Child Health
OAS/TA	Organization of American States - Program of Technical Cooperation
PAS	Para amino salycilic acid
PASB	Pan American Sanitary Bureau
PAHO	Pan American Health Organization
PHA	Public Health Administration
SCISP	Servicio Cooperativo Interamericano de Salud Pública
SESP	Servicio Especial de Salud Pública
SNEM	Servicio Nacional de Erradicación de la Malaria
Ung	Ungraded
UN	United Nations
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UN/TAA	United Nations Technical Assistance Administration
USA	United States of America
WHO	World Health Organization
WHO/TA	World Health Organization/Technical Assistance

TABLE OF CONTENTS

	Text Page	Details Page		Text Page	Details Page
Letter of Transmittal	1		SECTION 4. Division of Public Health	14	108
Introduction	2		Ch. 1. Office of the Chief		108
Method of Preparation	6		Ch. 2. Health Promotion Branch		108
Salary Schedules	7		Ch. 3. Communicable Diseases Branch		108
Scales of Assessments	9		Ch. 4. Environmental Sanitation Branch		110
Proposed Appropriations Resolution	10		Ch. 5. Malaria Eradication		110
			SECTION 5. Temporary Personnel	14	110
Informational Details - Narrative Explanations and Schedules			SECTION 6. Common Staff Costs	14	110
			SECTION 7. Common Services - Headquarters	15	112
<u>GENERAL INFORMATION TABLES</u>			<u>PART III</u>		
a. Functional Summary		74	PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS		
b. Summary by Related Activity		80	SECTION 1. - Zone Offices	16	
c. Summary of Programs by Major Expense		82	Zone I - Office, Caracas, Venezuela	16	114
d. Summary of Professional and Local Personnel		96	Zone II - Office, Mexico City, Mexico	16	130
			Zone III - Office, Guatemala City, Guatemala	16	148
<u>PART I</u>			Zone IV - Office, Lima, Peru	16	168
<u>PAN AMERICAN HEALTH ORGANIZATION</u>			Zone V - Office, Rio de Janeiro, Brazil	16	184
SECTION 1. Conference Services	13	98	Zone VI - Office, Buenos Aires, Argentina	16	196
SECTION 2. Organizational Meetings	13	98	Washington Office - Country Programs		216
Ch. 1. Meetings of the Pan American Sanitary Conference, Directing Council, Executive Committee and WHO Regional Committee		98	Interzone		218
Ch. 2. Meetings of the Executive Committee		98	SECTION 2. Programs (See index following pages)		
SECTION 3. Temporary Personnel	13	98	SECTION 3. Publications	72	242
SECTION 4. Common Staff Costs	13	100	SECTION 4. Repatriation Grant	72	242
			<u>PART IV</u>		
<u>PART II</u>			<u>AMOUNT FOR INCREASING THE WORKING CAPITAL FUND</u>	72	242
<u>PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS</u>			<u>ANNEXES</u>		
SECTION 1. Executive Offices	14	100	Annex 1. Other Extra - Budgetary Funds	244	244
Ch. 1. Office of the Director		100	Annex 2. World Health Organization Technical Assistance Category II Programs	247	248
Ch. 2. Library		100	Annex 3. Projects desired by Governments and not included within PAHO/WHO program and budget estimates for 1960	251	251
Ch. 3. Information and Publications Branch		102	Annex 4. Special Malaria Fund - Statement of Income and Expenditures	254	254
SECTION 2. Division of Education and Training	14	104			
Ch. 1. Office of the Chief		104			
Ch. 2. Fellowships Branch		104			
Ch. 3. Professional Education Branch		104			
SECTION 3. Division of Administration	14	104			
Ch. 1. Office of the Chief		104			
Ch. 2. Administrative Management and Personnel Branch		104			
Ch. 3. Budget and Finance Branch		106			
Ch. 4. General Services Office		106			
Ch. 5. Supply Office		108			

INDEX OF PROJECTS

	Text Page	Details Page		Text Page	Details Page
<u>ARGENTINA (Zone VI)</u>			<u>BRITISH GUIANA AND WEST INDIES (Zone I) (continued)</u>		
2 Smallpox Eradication	49	196	<u>British Guiana and West Indies</u>		
3 Nursing Education (Cordoba and El Chaco)	49	196	1 <u>Aedes aegypti</u> Eradication	17	116
4 National Institute of Microbiology	49	198	3 Public Health Nursing	17	116
7 Public Health Services	49	198	4 PAHO Public Health Administration		
8 Malaria Eradication	50	198	Fellowships	18	116
11 Rabies Control	50	198	<u>Jamaica</u>		
13 PAHO Public Health Administration			2 Malaria Eradication	18	116
Fellowships	50	198	4 University College of the West Indies	18	118
15 Nutrition	50	200	11 Public Health Training Station	18	118
17 School of Public Health	50	200	12 Nursing Education	18	118
18 Medical Education	50	200	<u>Trinidad</u>		
20 Tuberculosis Control	51	200	3 Malaria Eradication	18	118
23 Nursing Education (Rosario)	51	202	6 Public Health Legislation	19	118
24 Planning and Organization of			<u>Windward Islands</u>		
Hospital Services	51	202	2 Malaria Eradication	19	120
25 Training of Professional and			<u>BRITISH HONDURAS (Zone III)</u>		
Auxiliary Nursing Personnel	51	202	1 Malaria Eradication	30	148
26 National Institute of Rehabilitation	51	202	5 Public Health Services	30	150
27 Training of Personnel for Mental			6 PAHO Public Health Administration		
Health Programs	52	204	Fellowships	30	150
51 <u>Aedes aegypti</u> Eradication	52	204	<u>CANADA (Washington Office)</u>		
<u>BOLIVIA (Zone IV)</u>			1 WHO Public Health Administration		
4 Malaria Eradication	38	168	Fellowships	58	216
5 Nursing Education	38	170	2 Consultants in Specialized Fields		
10 Public Health Services	38	170	of Public Health	58	216
11 Joint Field Mission on Indigenous			<u>CHILE (Zone VI)</u>		
Populations	38	170	18 WHO/TA Public Health Administration		
12 Leprosy Control	39	170	Fellowships	52	204
13 WHO/TA Public Health Administration			19 Food and Drug Control	52	204
Fellowships	39	170	20 Midwifery Education	52	206
<u>BRAZIL (Zone V)</u>			21 Rehabilitation Center	52	206
3 Public Health Services (Northeast)	44	184	22 Institute of Occupational Health	53	206
8 National Virus Laboratory Services	44	186	26 PAHO Public Health Administration		
18 National Food and Drug Service	44	186	Fellowships	52	204
19 School of Public Health			27 Public Health Services		
(Rio de Janeiro)	44	186	(Ovalle, Copiapo)	53	206
24 Malaria Eradication	44	186	29 Advanced Nursing Education	53	208
28 PAHO Public Health Administration			30 Training for Laboratory Technicians	53	208
Fellowships	45	188	31 School of Public Health	53	208
31 Rehabilitation Training Center	45	188	34 Training of Nursing Auxiliaries	54	208
33 Training for Laboratory Technicians	45	188	35 Nutrition	54	208
34 Seminar on Diarrheal Diseases	45	188	36 <u>Aedes aegypti</u> Eradication	54	208
35 School of Public Health (Sao Paulo)	45	188	37 Medical Education	54	210
37 Dental Health Education	45	188	<u>COLOMBIA (Zone IV)</u>		
38 Smallpox Eradication	46	190	4 Public Health Services	39	172
39 Public Health Services (Mato Grosso)	46	190	5 Malaria Eradication	39	172
41 Malaria Eradication (Sao Paulo)	46	190	17 Smallpox Eradication	39	172
42 Rabies Control	46	190	18 WHO Public Health Administration		
43 Preventive Dentistry	47	192	Fellowships	39	172
44 Teaching of Public Health in Schools			19 Leprosy Control	39	174
of Veterinary Medicine	47	192	21 PAHO Public Health Administration		
45 Environmental Sanitation Training	47	192	Fellowships	39	172
48 Leprosy Control	47	192	<u>BRITISH GUIANA AND WEST INDIES (Zone I)</u>		
51 Yellow Fever Laboratory	47	192	<u>British Guiana</u>		
			5 Malaria Eradication	17	114
			7 Filariasis	17	114
			10 Public Health Services	17	116

Index of projects (continued)

	Text Page	Details Page
--	--------------	-----------------

COLOMBIA (Zone IV) (continued)

22 <u>Aedes aegypti</u> Eradication	40	174
24 School of Public Health	40	174
52 Yellow Fever, Carlos Finlay Institute	40	174

COSTA RICA (Zone III)

2 Malaria Eradication	30	150
14 Expansion of Local Public Health Services	31	150
15 PAHO Public Health Administration Fellowships	31	150
18 Advanced Nursing Education	31	150
20 Planning and Organization of Hospital Services	31	152

CUBA (Zone II)

1 <u>Aedes aegypti</u> Eradication	23	130
3 Public Health Services	23	132
4 Nursing Education	23	132
5 Malaria Eradication	23	132
6 PAHO Public Health Administration Fellowships	23	132
9 Waterworks Training Course	24	132

DOMINICAN REPUBLIC (Zone II)

2 Malaria Eradication	24	134
3 Nursing Education	24	134
4 Public Health Services	24	134
8 <u>Aedes aegypti</u> Eradication	24	134
10 BCG Vaccination	24	136
11 PAHO Public Health Administration Fellowships	25	136
14 Medical Education	25	136
52 Venereal Disease Control	25	136

ECUADOR (Zone IV)

4 Public Health Services	40	174
11 National Institute of Health	40	176
14 Malaria Eradication	40	176
16 Nursing Education	41	176
18 Leprosy Control	41	178
19 PAHO Public Health Administration Fellowships	41	178
20 Smallpox Eradication	41	178
53 National Institute of Nutrition	41	178

EL SALVADOR (Zone III)

2 Malaria Eradication	31	152
5 Health Demonstration Area	31	152
9 PAHO Public Health Administration Fellowships	32	152
10 Planning and Organization of Hospital Services	32	154
11 National Public Health Nursing Services	32	154
12 National Environmental Sanitation Services	32	154

FRENCH ANTILLES AND GUIANA (Zone I)

	Text Page	Details Page
<u>French Antilles and Guiana</u>		
2 <u>Aedes aegypti</u> Eradication	19	120
3 PAHO Public Health Administration Fellowships	19	120

GUATEMALA (Zone III)

1 Malaria Eradication	32	154
6 Training of Nursing Auxiliaries	33	154
8 Public Health Services	33	156
11 Tuberculosis Control	33	156
12 PAHO Public Health Administration Fellowships	34	156

HAITI (Zone II)

1 Yaws Eradication	25	136
4 Malaria Eradication	25	138
9 Public Health Laboratory	26	138
12 PAHO Public Health Administration Fellowships	26	138
14 <u>Aedes aegypti</u> Eradication	26	138
16 Public Health Services	26	138
19 Medical Education	26	138

HONDURAS (Zone III)

1 Malaria Eradication	34	156
4 Public Health Services	34	158
6 PAHO Public Health Administration Fellowships	34	158

MEXICO (Zone II)

14 Nursing Education	26	140
15 State Health Services	26	140
22 Public Health Services (Guanajusto)	27	140
25 PAHO Public Health Administration Fellowships	27	140
26 <u>Aedes aegypti</u> Eradication	27	142
28 Public Health Laboratory	27	142
30 School of Public Health	27	142
32 Medical Education	27	142
33 Dieldrin Toxicity Studies	28	142
34 Veterinary Medicine Education	28	142
35 Environmental Sanitation Training	28	144
53 Malaria Eradication	28	144

NICARAGUA (Zone III)

1 Malaria Eradication	34	158
5 Nursing Education	35	160
7 PAHO Public Health Administration Fellowships	35	160

PANAMA (Zone III)

1 Public Health Services	35	160
2 Malaria Eradication	35	160
8 PAHO Public Health Administration Fellowships	35	162

Index of projects (continued)		Text Page	Details Page			Text Page	Details Page
<u>PARAGUAY (Zone VI)</u>				<u>VENEZUELA (Zone I) (continued)</u>			
1	Malaria Eradication	54	210	17	Medical Education	20	124
9	Leprosy Control	54	210	18	National Institute of Hygiene	21	124
10	Public Health Services	55	210	19	School of Public Health	21	126
13	PAHO Public Health Administration Fellowships	55	212	20	Public Health Aspects of Accident Prevention	21	126
16	Administrative Methods and Practices in Public Health	55	212	<u>INTER-COUNTRY AND INTER-ZONE PROJECTS (AMRO)</u>			
<u>PERU (Zone IV)</u>				1	Environmental Sanitation Training	58	218
5	Malaria Eradication	42	178	7	<u>Aedes aegypti</u> Eradication (Central America and Panama)(Zone III)	35	162
15	Nursing Education	42	180	8	<u>Aedes aegypti</u> Eradication (Caribbean) (Zone I)	21	126
22	Public Health Services	42	180	10	Inter-American Program for Education in Biostatistics	58	218
23	Joint Field Mission on Indigenous Populations	42	180	16	Assistance to Schools of Public Health	58	218
25	PAHO Public Health Administration Fellowships	42	180	17.5	Waterworks Training Course	59	218
26	Public Health Orientation Course	43	180	18	Medical Education	59	218
28	Veterinary Medicine Education	43	180	23.5	Fifth Regional Nursing Congress	59	218
29	Tuberculosis Control	43	182	26	Brucellosis Control	59	218
54	Typhus Vaccine	43	182	28	Advanced Nursing Education	59	218
<u>SURINAM AND NETHERLANDS ANTILLES (Zone I)</u>				29	Cultural Anthropology	59	218
<u>Surinam</u>				35	Fellowships (Unspecified)	60	220
1	Malaria Eradication	19	120	39	Environmental Sanitation (Advisory Committee and Consultants)	60	220
<u>Surinam and Netherlands Antilles</u>				45	Laboratory Services	60	220
1	<u>Aedes aegypti</u> Eradication	19	122	46	Seminar on Nursing Education	60	220
2	PAHO Public Health Administration Fellowships	20	122	47	Yaws Eradication and Public Health Laboratory Services (Caribbean)(Zone I)	21	126
<u>UNITED STATES (Washington Office)</u>				48	Seminar on Teaching of Public Health in Schools of Veterinary Medicine	60	220
7	WHO Public Health Administration Fellowships	58	216	54	Collaboration with INCAP (Zone III)	36	162
10	Consultants in Specialized Fields of Public Health	58	216	57	Yellow Fever Studies	60	220
11	PAHO Public Health Administration Fellowships	58	216	60	Smallpox Eradication	61	220
<u>URUGUAY (Zone VI)</u>				61	Rabies Control	61	222
5	Public Health Services	55	212	63	Assistance to Schools of Nursing	61	222
9	Chagas' Disease	56	212	67	Teaching of Public Health in Schools of Veterinary Medicine	61	222
10	PAHO Public Health Administration Fellowships	56	212	72	Dental Health	62	222
13	Training of Public Health Personnel	56	212	74	Plague Investigation	62	222
15	Waterworks Operators School	56	214	76	Vaccine Testing	62	222
16	Chronic Diseases	56	214	77	Pan American Foot-and-Mouth Disease Center	62	224
<u>VENEZUELA (Zone I)</u>				81	Pan American Zoonoses Center	62	226
1	Local Health Services	20	122	85	Latin American Center for Classification of Diseases	63	226
2	Mental Health	20	122	86	Health Statistics (Zone III)	36	164
5	Onchocerciasis Investigation	20	122	88	<u>Aedes aegypti</u> Eradication	63	228
9	PAHO Public Health Administration Fellowships	20	122	90	Malaria Technical Advisory Services (Regional)	63	228
11	Plague Investigation	20	122	92	Polyomielitis	64	228
13	Treponematoses Eradication	20	122	93	Health Education (Zone II)	98	144
14	Nursing Education	20	124	94	Diarrheal Diseases in Child	64	228
15	Health Aspects of Nuclear Energy	20	124	95	Environmental Sanitation (Caribbean) (Zone I)	22	126
16	<u>Aedes aegypti</u> Eradication	20	124	98	Working Group on Medical Certification	65	230
				100	Courses on Nursing Supervision and Administration	65	230
				102	Pediatric Education	65	230
				106	Seminar on Public Health Administration	65	230
				110	Tuberculosis Prevention	65	230
				112	Fundamental Education Training Center (CREPAL)	66	232
				114	Training Center for Malaria Eradication (Mexico) (Zone II)	28	144
				117	Malaria Technical Advisory Services (Zone I)	22	128

Index of projects (continued)	Text Page	Details Page		Text Page	Details Page
<u>INTER-COUNTRY AND INTER-ZONE PROJECTS (AMRO)</u> (continued)					
118 Malaria Technical Advisory Services (Zone III)	36	164	160 Treponematoses Eradication	69	236
119 Malaria Technical Advisory Services (Zone IV)	43	182	162 Epidemiology (Zone II)	29	146
120 Malaria Technical Advisory Services (Zone II)	29	146	163 Epidemiology (Zone VI)	57	214
121 Malaria Eradication Evaluation Teams (Zone III)	36	164	165 Nutrition Advisory Service (Interzone)	69	236
122 Research and Development of Insecticide Application Equipment	66	232	178 Veterinary Public Health (Zone II)	29	146
123 Research and Development - Protective Equipment Against Toxic Insecticides	66	232	179 Veterinary Public Health (Zone IV)	43	182
125 Seminar on Malaria Eradication Evaluation Techniques	66	232	181 Live Poliovirus Vaccine Studies	69	236
130 Seminar on Mass Chemoprophylaxis and Surveillance Techniques in Malaria Eradication	66	232	182 Training Course in Dietary and Nutritional Surveys	69	238
132 Operational Assistance to Country Projects in Malaria Eradication	67	232	183 Nursing Midwifery	69	238
134 Training Center for Malaria Eradication (Kingston) (Zone I)	22	128	185 Hospital Planning and Organization	70	238
135 Malaria Eradication Trainees	67	232	187 Promotion of Urban Water Supply	70	238
137 Training Center for Malaria Eradication (Sao Paulo) (Zone V)	47	192	188 Veterinary Public Health (Zone III)	37	166
138 Studies on Malaria Chemotherapy	67	234	189 Veterinary Public Health (Zone V)	48	194
139 Malaria Technical Advisory Services (Zone V and VI)	48	194	196 Insecticide Testing Team	70	238
141 Health Education (Zone III)	37	164	197 Research on Resistance of Anophelines to Insecticides	70	238
142 Health Aspects of Nuclear Energy	66	234	198 Administrative Methods and Practices in Public Health	70	240
143 Health Statistics (Zone IV)	43	182	199 Anopheline Susceptibility Testing	71	240
144 Health Statistics (Zone II)	29	146	200 Conference on Live Poliovirus Vaccines	71	240
148 Laboratory for Production of Biologicals (Zone III)	37	166	201 Health Statistics (Zone V)	48	194
149 Leprosy Control	67	234	202 Leprosy Control (Zone III)	37	166
150 Food and Drug Services	68	234	203 Epidemiology (Zone III)	37	166
152 Conference of Directors of Schools of Public Health	68	234	204 Environmental Sanitation Training (Zone I)	22	128
155 Schistosomiasis Control	68	234	205 Environmental Sanitation Training (Zone II)	29	146
156 Latin American Training Program in Hospital Statistics	68	236	206 Environmental Sanitation Training (Zone III)	37	166
157 Health Statistics (Zone I)	22	128	207 Environmental Sanitation Training (Zone IV)	43	182
158 Mental Health	68	236	208 Environmental Sanitation Training (Zone V)	48	194
159 Health Statistics (Zone VI)	56	214	209 Environmental Sanitation Training (Zone VI)	57	214
			210 Medical Education (Zone VI)	57	214
			211 Seminar on Teaching of Internal Medicine	71	240
			212 Seminar on Teaching of Nursing Auxiliaries	71	240
			213 Seminar on Public Health Nursing Services	71	240
			Field Office - El Paso	58	216

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 1960.
2. The proposed program and budget estimates of the World Health Organization for the Region of the Americas for the financial year 1961.
3. The provisional draft of the proposed program and budget estimates of the Pan American Health Organization for the financial year 1961.



Abraham Horwitz
Director

INTRODUCTION

The international health activities proposed for the years 1960 and 1961 are presented in this document for consideration and appropriate action by the governing bodies of PAHO/WHO. This program has been developed, within the approved program policies of the Organization, in close consultation with national health authorities. While these activities have been planned and developed for consideration as one over-all program, they are displayed for budgetary purposes in four columns relating to the following sources of funds:

1. The Regular Budget of the Pan American Health Organization.

2. Other funds available to the PAHO for specified purposes including: (a) the PAHO Special Malaria Fund; (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, chiefly to finance the Pan American Foot-and-Mouth Disease Center; and (d) special grants made to PAHO for specific activities.

3. The allocation to the Region of the Americas from the Regular Budget of the World Health Organization.

4. Technical Assistance Funds of the United Nations administered by WHO for financing projects in the Region of the Americas.

Information for the three years 1959, 1960, and 1961 is shown throughout this document. The information for 1959 for all funds is based on the latest data available at the time of preparation of the document.

For 1960 the PAHO Regular Budget presents the program as submitted by the Director to the 37th Meeting of the Executive Committee which, after studying the proposal, resolved to endorse it and submit it to the XI Meeting of the Directing Council, together with its observations and recommendations contained in Document CE37/17, Annex 1. The information for the same year under the columns relating to WHO Regular, WHO/TA, and PAHO Other Funds represents the most recent estimated at the time the document was prepared.

The estimates for 1961 for WHO Regular and WHO/TA are those which the Director proposes, subject to the approval of the Directing Council acting as Regional Committee, to transmit to the Director-General of WHO for his use in preparing the proposed budget of WHO for that year. The 1961 estimates for PAHO Regular and PAHO Other Funds represent provisional proposals for review by the Directing Council.

Certain additional information is contained in annexes. In Annex 1 are shown estimates of funds which are planned to be expended by other international organizations, including UNICEF, in behalf of health programs in the Americas. These funds constitute an important part of international public health but are not shown in the main body of the document since they are not directly expended by PAHO/WHO.

Annex 2 presents schedules and narratives for WHO/TA Category II projects, which can be implemented in substitution for those of Category I if the latter cannot be carried out.

Annex 3 presents information on additional programs which could not be accommodated within the proposed budget levels.

In accordance with Resolution IV of the 31st Meeting of the Executive Committee, Annex 4 presents a statement of income and expenditures of the PAHO Special Malaria Fund.

The XI Directing Council is invited to: (1) review and take final action on the proposed PAHO Regular Program and Budget for 1960; (2) review the total proposed program for 1961, for all funds, and make observations and comments on its over-all content and balance; (3) examine and comment in detail on the provisional draft of the Pan American Health Organization regular program and budget for 1961, to guide the Director in the preparation of his proposed program and budget to be presented to the 39th Meeting of the Executive Committee and the XII Directing Council for consideration; and (4) examine in detail and make recommendations to the Director-General on the proposed WHO regional program and budget for 1961.

The 37th Meeting of the Executive Committee recommended that the Directing Council establish the level of \$4,100,000 for the regular budget of PAHO in 1960, thus accepting the budget level proposed by the Director. The Committee took note of the fact, as pointed out by the Director, that the requests for collaboration from Member Governments far exceeded the resources available to the Organization at the proposed level.

Taking into account the opportunities for a reasonable rate of development of the services expected from the Organization, as well as the progressively higher costs of operation, the Director is proposing an increase of \$400,000 in the PAHO Regular Program and activities for 1961. In addition, an amount of \$300,000 is proposed so as to begin the gradual increase of the Working Capital Fund until it has reached its established level, as recommended in Resolution X of the 37th Meeting of the Executive Committee. This represents a total increase of 17.1 per cent over that proposed for 1960. However, if the amount for the Working Capital Fund is excluded, the increase is only 9.8 per cent, which is modest in comparison to the increases approved in recent years.

Table I shows the increases proposed for 1960 and 1961 in relation to 1959 and 1960 respectively, as well as the relative distribution among the component parts of the budget for each year. It will be noted that the proportion devoted to Part III, (Pan American Health Organization - Field and Other Programs) increases throughout the years, whereas the proportions for Parts I (Pan American Health Organization) and II (Pan American Health Organization - Headquarters) show a corresponding decrease.

TABLE I
PAHO REGULAR BUDGET

Budget Parts	1959		1960		Increase of 1960 over 1959		1961		Increase of 1961 over 1960	
	Appropriation	% of Total	Proposed	% of Total	Amount	%	Proposed	% of Total	Amount	%
	\$		\$		\$		\$		\$	
I	217,162	6.0	220,463	5.4	3,301	-	190,764	4.2	(29,699)	-
II	1,276,464	35.5	1,427,858	34.8	151,394	-	1,437,799	32.0	9,941	-
III	2,106,374	58.5	2,451,679	59.8	345,305	-	2,871,437	63.8	419,758	-
Subtotal:	3,600,000	100.0	4,100,000	100.0	500,000	13.9	4,500,000	100.0	400,000	9.8
IV	-	-	-	-	-	-	300,000	-	300,000	-
TOTAL	3,600,000		4,100,000		500,000		4,800,000		700,000	17.1

To assist in the analysis of the field program by broad subject headings, tables II and III are presented on page 5. The subject headings in the tables correspond to the Bureau's three broad priorities. As such they are not comparable to the subject classification elsewhere in the budget document, which is according to WHO practice. While these tables give the over-all picture for estimated expenditures under the various headings, details may be found in the tables on pages 82 through 94, where each project is listed by subject and by object of expenditure.

The analysis is confined to Section 2, Part III, which contains the major portion of the field program, namely, that carried out as individual projects. It should be emphasized, however, that a substantial contribution is made to the field program by the headquarters and zone offices staff. Studies are now being made on methods of presenting the budget so as to show this participation, as well as a more precise and detailed program distribution.

Table II shows the estimates for subject headings in relation to all funds administered by PAHO/WHO, with the exception of the funds for the operation of the Pan American Foot-and-Mouth Disease Center. In order to permit the analysis of the program, which is expected to be carried out with funds available for general purposes, Table III excludes the estimates for PAHO Other, which are to be used for specific purposes only.

If all the funds administered by PAHO/WHO are taken into account, the major portion, almost 60 per cent, is devoted to the broad subject, Communicable Diseases. This is due to the fact that the malaria eradication program, for which substantial amounts of special contributions are expected, continues to receive major emphasis. On the other hand, it should be noted that while the percentage for Communicable Diseases is slowly decreasing over the years, it is increasing for Strengthening Health Services and Education and Training.

However, if only the PAHO/Regular, WHO/Regular, and WHO/TA are considered, Table III shows that approximately 28 per cent of the budget is proposed for the total of

activities directly related to Communicable Diseases, including eradication programs. The amounts proposed for *Aedes aegypti* eradication is slightly increased. Success in this program has been achieved in some areas, and new efforts will be made to reach the final stage of complete eradication. In regard to the two other eradication programs, yaws and smallpox, funds are proposed in order to continue the cooperative activities with Member Governments engaged in these programs.

Estimates for projects classified under Other Communicable Diseases amount to about 13 per cent of the proposal for field programs of these three funds. The diseases concerned include tuberculosis, leprosy, poliomyelitis, schistosomiasis, Chagas' disease, typhus, plague, and yellow fever. Under this heading are also included several projects for strengthening laboratory services related directly to communicable diseases, from the standpoint of both diagnosis and production of biologicals. Increasing attention is being given to the zoonoses both through steady development of the Pan American Zoonoses Center and through special projects for rabies and brucellosis.

Approximately three fifths of the estimates for field programs under PAHO/Regular, WHO/Regular, and WHO/TA come under the category Strengthening Health Services. The largest single unit is for Integrated Health Services, which are expected to be in progress in almost every country in 1960 and 1961. The projects for integrated health activities, which are the backbone of the long-range program of the Organization in strengthening basic health services, are composed of a basic team of medical officer, public health nurse, and sanitary engineer, plus consultants in specific fields as needed. Of the total for Integrated Health Services, more than half is to be devoted to educational activities chiefly in the form of local training courses.

Among the activities listed under Strengthening Health Services, nutrition receives a high priority because malnutrition impairs human health and productivity. In this field, the activities are largely financed from sources

shown under PAHO Other Funds, notably the INCAP regular budget and grants from the Kellogg Foundation and other institutions. Provision is being made in the PAHO/Regular budget to expand the specialized advisory services to governments in this subject, thus complementing those provided through the projects for integrated health services.

Training in statistics and advice to national health statistical services have been emphasized since the beginning of the Organization's program. A further increase is planned for 1961 to meet the requests from Member Governments.

There continues to be a demand for advice and assistance in revising national food and drug control procedures and legislation. Provision is made for a more extensive approach to this field, in accordance with instructions received from the governing bodies.

In the field of environmental sanitation, certain projects are specifically identified, but the greatest portion of the work for sanitation is carried on within the integrated health projects. When this is taken into account, about 10 per cent of the three funds shown on Table III are devoted to this subject, based on estimated costs related to engineers and sanitarians connected with those projects. Large national and municipal water supply programs are receiving increased attention among both national and international groups. Consequently, provision has been made to permit the Organization to play a progressively more important role in promoting this program and giving advice to Member Governments.

The category "Other" under Strengthening of Health Services is an all inclusive one, because it contains subjects which overlap with each other and with other subject headings, mainly Integrated Health Services. For example, maternal and child health and health education are included under this category, but these important activities are also a major part of the responsibilities of the projects classified under the headings Integrated Health Services and Nutrition. Thus it would be misleading to present separate headings for the few projects which deal with particular aspects in these fields. The projects which can be specifically designated as maternal and child health represent only about 1 per cent. When the portion for this subject carried out in other health projects, primarily those in Integrated Health Services is taken into consideration, the proportion may be roughly estimated at about 10 per cent.

In this connection it should be pointed out that, to a certain extent, all the subject classifications are inter-related. For example, projects classified under Communicable Diseases inevitably involve education and training of personnel. The strengthening of basic health services is, on the other hand, the major factor in the programs against the communicable diseases since no long-range immunization program can succeed without adequate permanent health services.

Under the heading Education and Training, Table III shows estimates for those activities specifically connected with strengthening of medical, public health, and nursing educational institutions as well as with fellowships, seminars, or surveys dealing with those basic professional fields. Greatest emphasis is being given to the essential field of nursing education, representing over 9 per cent of the field program of the three funds. However, the total effort planned for the Organization in educational activities goes far beyond those specific projects mentioned above, since in any project the training of national personnel has the highest priority. This can be observed particularly in subjects such as Integrated Health Services, Statistics and Environmental Sanitation where training of personnel occupies a great proportion of time and effort of international staff. As shown in Table III, it is estimated that the total effort for education and training adds up to 43 per cent in 1960 and 44 per cent in 1961, an effort which seems to be commensurate with the key role which education and training should play in international health.

- - - - -

International health collaboration is characterized by a dynamic quality which must be reflected in adapting the program in order to achieve a balance among the needs existing and expressed by the member countries, and the potentialities, personnel, and material available to governments and to the Organization to meet those needs. The Director believes that the program and budget herein presented reflects a further progress towards a proper, balanced international health program whose effects will, in increasing measure, benefit all the people of the Western Hemisphere.

ANALYSIS OF FIELD PROGRAM BY SUBJECT CLASSIFICATION

TABLE II

(1) Subject	All Funds - 1960				All Funds - 1961				PAID Regular, WHO Regular and TA - 1960				PAID Regular, WHO Regular and TA - 1961			
	(2) \$	(3) %	(4) \$	(5) %	(6) \$	(7) %	(8) \$	(9) %	(10) \$	(11) %	(12) \$	(13) %	(14) \$	(15) %	(16) \$	(17) %
Communicable Diseases	4,359,086	59.7	420,523	5.7	4,358,507	57.4	322,119	4.2	1,035,638	28.8	88,171	2.4	1,101,549	27.6	94,996	2.4
Eradication Programs	3,771,865	51.7	314,929	4.3	3,760,882	49.4	252,293	3.1	553,909	15.4	3,250	1.1	576,520	14.3	5,270	1.1
Malaria	3,714,381	45.4	311,945	4.3	3,724,584	43.0	277,123	3.0	553,909	15.4	3,250	1.1	576,520	14.3	5,270	1.1
Acute Malaria	331,211	4.5	311,945	4.3	350,582	4.6	277,123	3.0	553,909	15.4	3,250	1.1	576,520	14.3	5,270	1.1
Typh	92,081	1.3	3,250	*	82,842	1.1	5,270	.1	331,211	9.2	3,250	.1	350,582	8.8	5,270	.1
Smallpox	34,290	.5	105,528	1.4	52,527	.7	89,776	1.1	92,081	2.6	3,250	.1	82,842	2.1	5,270	.1
Other Communicable Diseases	587,123	8.0			608,002	8.0			487,329	13.4	84,921	2.3	525,029	13.1	89,776	2.3
Strengthening Health Services	2,168,098	32.5	1,274,588	17.5	2,547,946	33.5	1,273,693	17.5	1,989,087	55.3	895,577	24.9	2,197,946	55.1	979,693	24.6
Integrated Health Services	876,643	12.0	433,063	5.9	903,425	11.8	434,405	5.7	876,643	24.4	433,063	12.0	903,425	22.7	434,405	10.9
Nutrition	526,548	7.2	396,270	5.4	506,495	6.7	371,638	4.9	147,537	4.1	17,298	.5	156,495	3.9	21,638	.5
Statistics	148,177	2.0	47,205	.7	176,204	2.3	78,748	1.0	148,177	4.1	47,205	1.3	176,204	4.4	78,748	2.0
Food and Drugs	57,910	.8	18,320	.3	66,066	.9	18,900	.3	57,910	1.6	18,320	.5	66,066	1.7	18,900	.5
Dental Health	36,442	.5	30,402	.4	35,462	.5	28,175	.4	36,442	1.0	30,402	.9	35,462	.9	28,175	.7
Veterinary Public Health	80,797	1.1	18,100	.2	84,573	1.1	18,100	.2	80,797	2.3	18,100	.5	84,573	2.1	18,100	.5
Environmental Sanitation	112,554**	1.6	62,167	.9	143,150**	1.9	61,746	.8	112,554**	3.1	62,167	1.7	143,150**	3.6	61,746	1.5
Other (including unapportioned fellowships)	529,027	7.3	269,061	3.7	632,771	8.3	317,561	4.2	529,027	14.7	269,061	7.5	632,771	15.8	317,561	8.0
Education and Training	571,214	7.8	571,214	7.8	688,217	9.1	688,217	9.0	571,214	15.9	571,214	15.9	688,217	17.3	688,217	17.2
Medical	80,448	1.1	80,448	1.1	145,030	1.9	145,030	1.9	80,448	2.2	80,448	2.2	145,030	3.6	145,030	3.6
Public Health	114,487	1.6	114,487	1.6	148,769	2.0	148,769	2.0	114,487	3.2	114,487	3.2	148,769	3.8	148,769	3.7
Nursing	376,279	5.1	376,279	5.1	394,418	5.2	394,418	5.1	376,279	10.5	376,279	10.5	394,418	9.9	394,418	9.9
TOTAL	7,298,398	100.0	2,266,325	31.0	7,604,670	100.0	2,340,029	30.7	3,595,939	100.0	1,554,962	43.2	3,987,712	100.0	1,762,906	44.2

* Less than .05 per cent.

**This item does not include the portion of Integrated Health projects devoted to Environmental Sanitation estimated at \$244,934 in 1960 and \$254,405 in 1961.

Form of Presentation

The format and content of the program and budget document conform to established practice.

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: "Informational Details--Narrative Explanations and Schedules--PAHO Regular Budget, PAHO Other Funds, WHO Regular Budget, WHO Technical Assistance Funds".

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

All the schedules include estimates over a three-year period. The first schedules are devoted to General Information Tables, which facilitate study of the entire budget in summary form by function, related activity, major expense, and personnel. 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 Sections relating to Publications and Repatriation Grant. In each zone will be found the zone office, the country projects, and the intercountry projects operating within the zone. After the zones are presented the schedules for country projects administered by the Washington Office and the interzone projects. In Part IV is displayed an amount for the increase of the Working Capital Fund, as recommended by the Executive Committee at its 37th Meeting (Resolution X).

Method of Computation

All estimates are expressed in U.S. dollars.

For the year 1959 the latest allotment analyses completed prior to completion of this document serve as a basis for the estimates.

The situation as of 1 January 1959 has been used for projecting salaries and common staff costs for all established positions in Parts I and II of the budget and zone offices for the years 1960 and 1961. 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) posts on new WHO Regular projects, in which case a delay factor estimated at three months is applied by deduction from the summary total of all such projects;
- 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, which is assumed to be not earlier than 1 April;
- 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, appears below. 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.

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.

TABLE OF AVERAGES

(Used in the costing of vacant professional posts)

	Short-term Consultants	1/ Schedule "R" Assignments (Washington Office)	2/ Schedule "S" Assignments (Zone Offices)	Schedule "S" Assignments (Project staff)
<u>Pan American Health Organization</u>		All Grades	All Grades	All Grades
	\$	\$	\$	\$
3/Dependents' allowance		800	800	800
Recruitment and repatriation		1,500	1,500	1,500
Installation per diem		800	800	800
Home leave travel		1,100	1,100	1,100
Transportation of household effects		1,500	--	--
Fees	700 p.m.			
Travel	600 p.m.			
<u>World Health Organization</u>		D2-P5	P4-P3	P2-P1
		\$	\$	\$
3/Dependents' allowance		600	360	180
(including education grant)				
Recruitment and repatriation		750	750	450
Installation per diem		650	550	450
Home leave travel		1,900	1,200	500
Transportation of household effects		900	700	300
3/Post adjustment		D-rate	D-rate	S-rate
3/Assignment allowance		--	--	--
5/Repatriation grant(filled posts only)		150	150	150
Fees	600 p.m.			
Travel	700 p.m.			

- 1/ Applies for staff with duty station in the Washington Office.
- 2/ Applies for staff with duty station in the zone offices.
- 3/ Averages for full year; applied proportionately for shorter periods.
- 4/ Applicable in 1961 if recruitment is expected to be effected during 1959, or in the first half of 1960. If recruitment

- is expected to be effected during 1959 or the second half of 1960, the average to be applied is \$250 in 1960 and 1961, respectively.
- 5/ Applied only where present incumbents are eligible for this grant.

SALARY SCHEDULESINTERNATIONAL STAFF WAGE SCALEU.S. Dollars (Effective 1 April 1951)

	I	II	III	IV	V	VI	VII	VIII	IX	X
P 1	3,600	3,800	4,000	4,200	4,400	4,600	4,800	5,000		
P 2	4,800	5,000	5,200	5,400	5,600	5,800	6,000	6,200	6,400	
P 3	6,000	6,200	6,400	6,625	6,850	7,075	7,300	7,525	7,750	8,000
P 4	7,300	7,525	7,750	8,000	8,250	8,500	8,750	9,000	9,250	9,500
P 5	8,750	9,000	9,250	9,500	9,800	10,100	10,400	10,700	11,000	
P 6 or D 1	10,000	10,400	10,800	11,200	11,600	12,000				
D 2	12,500									

ANNUAL LOCAL WAGE SCALE - WASHINGTONU.S. Dollars (Effective 1 July 1958)

	I	II	III	IV	V	VI	VII	VII(*)
WL 1	2,265	2,365	2,465	2,565	2,665	2,765	2,865	2,965
WL 2	2,425	2,525	2,625	2,725	2,825	2,925	3,025	3,125
WL 3	2,745	2,850	2,955	3,060	3,165	3,270	3,375	3,480
WL 4	3,070	3,200	3,330	3,460	3,590	3,720	3,850	3,980
WL 5	3,340	3,490	3,640	3,790	3,940	4,090	4,240	4,390
WL 6	3,640	3,800	3,960	4,120	4,280	4,440	4,600	4,760
WL 7	3,975	4,160	4,345	4,530	4,715	4,900	5,085	5,270
WL 8	4,390	4,595	4,800	5,005	5,210	5,415	5,620	5,825

ANNUAL LOCAL WAGE SCALE - EL PASOU.S. Dollars (Effective 1 January 1957)

	I	II	III	IV	V	VI	VII	VII(*)
EPL 1	2,330	2,390	2,450	2,510	2,570	2,630	2,690	2,750
EPL 2	2,910	2,990	3,070	3,150	3,230	3,310	3,390	3,470
EPL 3	3,120	3,220	3,320	3,420	3,520	3,620	3,720	3,820

ANNUAL LOCAL WAGE SCALE - ZONE II (MEXICO)Mexican Pesos (Effective 1 October 1958)

	I	II	III	IV	V	VI	VII	VIII	VIII(*)
ML 1	11,300	11,800	12,300	12,800	13,300	13,800	14,300	14,800	15,300
ML 2	13,900	14,450	15,000	15,550	16,100	16,650	17,200	17,750	18,300
ML 3	15,200	15,900	16,600	17,300	18,000	18,700	19,400	20,100	20,800
ML 4	18,500	19,400	20,300	21,200	22,100	23,000	23,900	24,800	25,700
ML 5	23,100	24,060	25,020	25,980	26,940	27,900	28,860	29,820	30,780
ML 6	28,250	29,425	30,600	31,775	32,950	34,125	35,300	36,475	37,650
ML 7	34,600	36,000	37,400	38,800	40,200	41,600	43,000	44,400	45,800
ML 8	40,500	42,100	43,700	45,300	46,900	48,500	50,100	51,700	53,300

*Additional step for language proficiency.

SALARY SCHEDULES (continued)ANNUAL LOCAL WAGE SCALE - ZONE III (GUATEMALA)
Guatemalan Quetzales (Effective 1 January 1956)

	I	II	III	IV	V	VI	VII	VII(*)
GL 1	790	835	880	925	970	1,010	1,055	1,100
GL 2	990	1,055	1,120	1,190	1,255	1,320	1,385	1,450
GL 3	1,320	1,420	1,520	1,620	1,715	1,815	1,915	2,015
GL 4	1,650	1,750	1,850	1,950	2,045	2,145	2,245	2,340
GL 5	1,980	2,090	2,200	2,310	2,420	2,530	2,640	2,750
GL 6	2,310	2,420	2,530	2,640	2,750	2,860	2,970	3,080
GL 7	2,640	2,770	2,905	3,035	3,170	3,300	3,430	3,565
GL 8	2,970	3,100	3,235	3,365	3,500	3,630	3,760	3,895
GL 9	3,300	3,430	3,565	3,695	3,830	3,960	4,090	4,225

ANNUAL LOCAL WAGE SCALE - ZONE IV (LIMA)
Peruvian Soles (Effective 1 January 1958)

	I	II	III	IV	V	VI	VII	VIII	VIII(*)
LL 1	18,000	18,900	19,800	20,700	21,600	22,500	23,400	24,300	
LL 2	24,000	25,200	26,400	27,600	28,800	30,000	31,200	32,400	
LL 3	36,000	37,800	39,600	41,400	43,200	45,000	46,800	48,600	50,400
LL 4	45,000	47,400	49,800	52,200	54,600	57,000	59,400	61,800	64,200
LL 5	54,000	56,700	59,400	62,100	64,800	67,500	70,200	72,900	75,600
LL 6	69,600	73,200	76,800	80,400	84,000	87,600	91,200	94,800	98,400
LL 7	84,000	88,200	92,400	96,600	100,800	105,000	109,200	113,400	117,600

ANNUAL LOCAL WAGE SCALE - ZONE V (RIO DE JANEIRO)
Brazilian Cruzeiros (Effective 1 January 1958)

	I	II	III	IV	V	VI	VII	VIII	IX	X	X(*)
RL 1	69,600	73,200	76,800	80,400	84,000	87,600	91,200	94,800	98,400	102,000	105,600
RL 2	89,000	93,100	97,200	101,300	105,400	109,500	113,600	117,700	121,800	125,900	130,000
RL 3	133,700	139,800	145,900	152,000	158,100	164,200	170,300	176,400	182,500	188,600	194,700
RL 4	187,400	195,500	203,600	211,700	219,800	227,900	236,000	244,100	252,200	260,300	268,400
RL 5	256,600	265,600	274,600	283,600	292,600	301,600	310,600	319,600	328,600	337,600	346,000
RL 6	298,900	308,800	318,700	328,600	338,500	348,400	358,300	368,200	378,100	388,000	397,900
RL 7	332,900	344,300	355,700	367,100	378,500	389,900	401,300	412,700	424,100	435,500	446,900
RL 8	372,900	385,900	398,900	411,900	424,900	437,900	450,900	463,900	476,900	489,900	502,900

ANNUAL LOCAL WAGE SCALE - ZONE VI (BUENOS AIRES)
Argentine Pesos (Effective 1 November 1958)

	I	II	III	IV	V	VI	VII	VIII	VIII(*)
BAL 1	30,600	32,130	33,660	35,190	36,720	38,250	39,780	41,310	42,840
BAL 2	43,200	45,360	47,520	49,680	51,840	54,000	56,160	58,320	60,480
BAL 3	50,500	53,025	55,550	58,075	60,600	63,125	65,650	68,175	70,700
BAL 4	69,300	72,765	76,230	79,695	83,160	86,625	90,090	93,555	97,020
BAL 5	83,300	87,465	91,630	95,795	99,960	104,125	108,290	112,455	116,620
BAL 6	106,000	111,300	116,600	121,900	127,200	132,500	137,800	143,100	148,400
BAL 7	140,000	147,000	154,000	161,000	168,000	175,000	182,000	189,000	196,000

*Additional step for language proficiency.

SCALE OF ASSESSMENTS OF THE
MEMBER STATES OF THE PAN AMERICAN HEALTH
ORGANIZATION FOR THE FINANCIAL YEAR ENDING
31 DECEMBER 1960, BASED ON THE PAN AMERICAN
UNION SCALE OF 1959-1960

Country	Percentage	Amount
	%	\$
Argentina	7.47	298,800
Bolivia	0.30	12,000
Brazil	7.51	300,400
Chile	1.98	79,200
Colombia	2.28	91,200
Costa Rica	0.30	12,000
Cuba	1.84	73,600
Dominican Republic	0.37	14,800
Ecuador	0.44	17,600
El Salvador	0.37	14,800
Guatemala	0.37	14,800
Haiti	0.30	12,000
Honduras	0.30	12,000
Mexico	5.23	209,200
Nicaragua	0.30	12,000
Panama	0.30	12,000
Paraguay	0.30	12,000
Peru	0.81	32,400
United States	66.00	2,640,000
Uruguay	0.88	35,200
Venezuela	2.35	94,000
	<u>100.00</u>	<u>4,000,000</u>

Assessments in respect to:

France	*	6,500
Netherlands	*	4,814
United Kingdom	**	28,571

In accordance with Article LX 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.

TENTATIVE SCALE OF ASSESSMENTS OF THE
MEMBER STATES OF THE PAN AMERICAN HEALTH
ORGANIZATION FOR THE FINANCIAL YEAR ENDING
31 DECEMBER 1961, BASED ON THE PAN AMERICAN
UNION SCALE OF 1959-1960

Country	Percentage	Amount
	%	\$
Argentina	7.47	351,090
Bolivia	0.30	14,100
Brazil	7.51	352,970
Chile	1.98	93,060
Colombia	2.28	107,160
Costa Rica	0.30	14,100
Cuba	1.84	86,480
Dominican Republic	0.37	17,390
Ecuador	0.44	20,680
El Salvador	0.37	17,390
Guatemala	0.37	17,390
Haiti	0.30	14,100
Honduras	0.30	14,100
Mexico	5.23	245,810
Nicaragua	0.30	14,100
Panama	0.30	14,100
Paraguay	0.30	14,100
Peru	0.81	38,070
United States	66.00	3,182,000
Uruguay	0.88	41,360
Venezuela	2.35	110,450
	<u>100.00</u>	<u>4,700,000</u>

Assessments in respect to:

France	*	7,638
Netherlands	*	5,657
United Kingdom	**	33,571

In accordance with Article LX 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 1959-1960 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.

$\frac{1}{2} \left(\frac{1}{2} \right)^{n-1} = \frac{1}{2^n}$

[illegible]

PART I

PAN AMERICAN HEALTH ORGANIZATION

SECTION 1 - Conference Services (See page 98)

Included in this section of the program and budget are the estimates for the following units of the Conference and Publications Section of the Information and Publications Branch: Office of the Chief; Conference Arrangements and Documents Section; and Minutes and Translation Section. The other units of the Branch are displayed in Part II, Chapter 3.

The estimate for 1961 contains no change in the number of posts for this section.

SECTION 2 - Organizational Meetings (See page 98)

Provision is made in Chapter 1 for the 1961 meeting of the Directing Council in Washington, as well as the meetings of the Executive Committee held at the time of the meeting of the Council. The amounts shown are the actual estimated requirements for each meeting. The reduction in estimated cost 1961 meeting as against 1960 meeting reflects the estimated difference of cost of a meeting in Washington and a meeting away from the Headquarters city.

Chapter 2 contains the estimated cost for the spring meeting of the Executive Committee, which is usually held in Washington. The estimate for 1961 is based on previous years experience and represents no increase over 1960.

SECTION 3 - Temporary Personnel (See page 98)

An estimate of \$1,350 is included for temporary personnel for conferences and related activities. This sum represents no increase over 1960.

SECTION 4 - Common Staff Costs (See page 100)

A detailed explanation of the items included under this section appears in Part II, Section 6 of this document. (See page 14)

PART II

PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS

SECTION 1 - Executive Offices (See page 100)

The Executive Offices are composed of the Office of the Director, which includes the Assistant Director and the Secretary General. The Assistant Director has responsibility for the Library (Chapter 2) and the Information and Publications Branch (Chapter 3).

No change is requested in the number of posts in the Office of the Director for 1961 nor is there any change in the estimate for duty travel.

Chapter 2 of Section 1 covers the activities of the Library. No change is requested in the staff complement for this organizational unit.

Chapter 3 contains the estimate for the Information and Publications Branch, with the exception of the units noted in Part I, Section 1. Provision is made for the same number of posts for these activities in 1961 as in 1960. An increase of \$2,976 from the World Health Organization Regular Funds is included for 1961 for the periodical, "World Health", bringing the estimate to \$45,000 from the 1960 estimate of \$42,024. This increase is required in order to permit an expansion in the number of copies of the periodical to be published in 1961. Small increases of \$250 are included in 1961 for both PAHO and WHO Regular Funds for information Supplies, Materials and Other Services, bringing each total to \$3,250 from the 1960 figure of \$3,000. These increases will meet the cost of commodities and services required in the anticipated rise in activity. Similar small increases are included in 1961 in the Visual Aids activity to cover the cost of the anticipated rise in program in this area. These include increases of \$100 in PAHO Regular and \$55 in WHO Regular for Drafting Services; \$400 in WHO Regular for Photographic Services; and \$400 in both PAHO Regular and WHO Regular for Exhibits.

SECTION 2 - Division of Education and Training (See page 104)

The Division of Education and Training consists of the Office of the Chief, Fellowships Branch, and Professional Education Branch.

No changes are reflected in the estimate for this division in the number of posts for 1961 over 1960, nor is there any change in duty travel.

SECTION 3 - Division of Administration (See page 104)

The Division of Administration is composed of the following organizational units: Office of the Chief, Administrative Management and Personnel Branch, Budget and Finance Branch, General Services Office, and Supply Office.

No changes are proposed in this estimate in the number of posts in the Division of Administration in 1961, nor is there any change in the duty travel for the division.

SECTION 4 - Division of Public Health (See page 108)

The Division of Public Health is composed of the Office of the Chief, Health Promotion Branch, Communicable Diseases Branch, Environmental Sanitation Branch, and Malaria Eradication Office.

The estimate for this division for 1961 contains no change in number of posts or in duty travel over the estimate for 1960.

SECTION 5 - Temporary Personnel (See page 110)

The estimate for this section represents a continuation of the need for this item at the same level in 1961 as in 1960.

SECTION 6 - Common Staff Costs (See page 110)

Common Staff Costs comprise (1) the Organization's contribution to the U. N. Pension Fund, (2) the Organization's contribution to staff accident and sickness insurance, (3) post adjustment allowance, (4) service benefit, (5) repatriation grant, (6) dependents' allowance, (7) recruitment costs, (8) home leave travel, and (9) reimbursement of income tax.

The Organization's contribution to the U. N. Pension Fund for professional staff members having full participation in the Fund is 14.7 per cent of the staff member's salary (14 per cent for local staff), exclusive of allowances, and 4.75 per cent of the professional staff member's salary for staff having associate participation status (4.5 per cent for local staff). The small increase in the budget for this item is proportionate to the rise in salary costs due to normal within-grade increments.

Provision is made for the Organization's share of the cost of staff insurance. The Organization's contributions were estimated on an average of 2.25 per cent for all PASB and WHO staff.

Post adjustment allowance is computed on the basis of the established entitlement of the staff, at the time of preparation of the budget, for all occupied positions and for vacant positions on PASB. For the method of computing vacant positions on WHO, see Table of Averages referred to in the Method of Preparation.

Dependents' allowance is computed on the basis of the known entitlements of staff for all occupied positions, and on the basis of an average for all vacant positions.

Recruitment cost estimates are based on the known vacant positions at the time of preparation of the document and are based on the year when recruitment will take place.

Home leave estimates are furnished on the known eligibility of staff members at the time of preparation of the document. Since a staff member is eligible for home leave once in every two years of qualifying service, the incidence of budgetary requirement varies with the appointment dates. The decrease in estimated cost in 1961 is occasioned by the smaller number of staff members eligible for this allowance during this year.

As in the past, an item is included for reimbursement of income tax to staff members who are required to pay this tax.

SECTION 7 - Common Services (See page 112)

The estimates for the various Common Services for the Washington Office are shown in detail in the schedules. All costs are divided 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.

No changes are requested for 1961 over 1960 for this section.

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, West Indies Federation 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 114)

Zone II : Cuba, Dominican Republic, Haiti, and Mexico. The Zone Office is located in Mexico, D.F., Mexico.
(See page 130)

Zone III : Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama, and British Honduras. The Zone Office is located in Guatemala, Guatemala.
(See page 148)

Zone IV : Bolivia, Colombia, Ecuador, and Peru. The Zone Office is located in Lima, Peru. (See page 168)

Zone V : Brazil. The Zone Office is located in Rio de Janeiro, Brazil. (See page 184)

Zone VI : Argentina, Chile, Paraguay, and Uruguay. The Zone Office is located in Buenos Aires, Argentina.
(See page 196)

Relations with Canada and the United States are under the jurisdiction of the Washington Office. A Field Office in El Paso 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.

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, 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 1959 and some fluctuation in costs as compared to previous years has been reflected, owing to change in rates.

PART III

ZONE I

Zone Office (See page 114)

For text see "Zone Offices," page 16.

BRITISH GUIANA AND WEST INDIESBRITISH GUIANA-5, Malaria Eradication (See page 114)

The comprehensive residual house-spraying program begun in 1944 has eradicated malaria from the densely populated (425,000) coastal region of British Guiana. Limited spraying of certain strategic areas is now sufficient to prevent its reintroduction from the interior, where malaria is still found.

In the interior the Indian population of about 30,000 is very nomadic and is scattered over a wide area. Transportation to and from the interior is extremely difficult, time consuming, and expensive. Under these conditions residual house-spraying with insecticides is not effective, and the administration of drugs in adequate dosage and at proper intervals is not applicable.

It is planned to implement a project for the eradication of malaria from the interior with treated salt, using the Pinotti method. The plan is in preparation, and will be put into effect in 1959 to coincide with similar action across the border in Brazil. The government's expenditures are estimated at \$75,000 over three years for this campaign. UNICEF is expected to provide insecticides for strategic spraying, transportation for distribution of salt, a mixing machine for the preparation of treated salt, and laboratory supplies.

Provision is made by PAHO for short-term consultants to give periodic technical advice regarding this treatment method. Technical advisory services will also be provided from the Zone Advisory Team (AMRO-117). Provision is also made for drugs. Fellowships are provided in 1959.

BRITISH GUIANA-7, Filariasis (See page 114)

The Organization is providing the services of a consultant to evaluate the pilot filariasis control program which is based on chemotherapy of infected persons.

BRITISH GUIANA-10, Public Health Services (See page 116)

Now that malaria eradication has been achieved on the densely populated coastlands the government plans to extend the network of health centers and to expand rural health services, including environmental sanitation, health education, nursing services, communicable disease control, with emphasis on filariasis, tuberculosis, venereal diseases and leprosy, with assistance from UNICEF and advisory services from PAHO staff in the Zone Office and in related projects. Advisory services will be given to the central and municipal health departments.

To coordinate these various international activities provision is made for one medical officer in 1960. Fellowships in special fields have already been awarded.

BRITISH GUIANA AND WEST INDIES-1, Aedes aegypti Eradication (See page 116)

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

Under this project, international sanitarians are assigned to specific areas; they 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.

Bermuda, British Guiana, Grenada, Nevis and St. Vincent have already achieved eradication. St. Kitts and St. Lucia have reached the final stage where search of the last hidden foci is underway. In Trinidad, Aedes aegypti resistance to DDT retarded the campaign, but good results are now being achieved by the application of residual spraying with dieldrin. In the Bahamas, intensive work in the island of New Providence is being directed towards freeing the few remaining infested areas, after which work will begin in the many out-islands. In Antigua, Barbuda and Anguilla intensification of the campaign is achieving good results. The campaign in Montserrat, which started in 1957, has been proceeding successfully and eradication should be achieved early in 1959.

In 1958, Jamaica extended and reorganized the campaign and, after the discovery of Aedes aegypti resistance to DDT late in the year, it is planned to assist in the resolution of this problem, in 1959 - 1961. In 1959, it is planned to assist in the organization of campaigns in Dominica and the British Virgin Islands. It is expected that by 1960 every territory will either have achieved eradication or have a comprehensive service in full operation. Vigilance services will follow where eradication has been achieved.

Each territory has been divided into localities and cycles of inspection, and perifocal treatment with DDT of every actual and potential water container is carried out. It has been the experience in the Caribbean that the usual 12-week cycle is too long for effective work, especially where infestation is heavy and widespread and where large containers are used for storage. The interval between perifocal applications has been shortened to 4 to 6 weeks with good results.

Provision is made for six sanitarians and one entomologist. In 1961 provision is made for supplies and equipment.

BRITISH GUIANA AND WEST INDIES-3, Public Health Nursing (See page 116)

Surveys of public health nursing services have been carried out in British Guiana, Trinidad, Barbados and Jamaica with the guidance and assistance of the Regional Adviser on public health nursing.

In Barbados three health centers have been established and are expanding their operations to cover the broad scope of public health nursing services. In Trinidad a post has been established for a national nurse, with

island-wide responsibilities for public health nursing services, and plans have been made for the expansion of existing maternal and child health services in rural areas, by improving the present 92 health posts and centers and by the addition of ten more during the period 1959-1962. In British Guiana a network of health centers is being developed and emphasis is to be placed on maternal and child health as an integral part of a well-rounded health service in rural areas.

To provide continuous technical advisory and evaluation services to the governments and develop further programs, with UNICEF assistance, provision is made for one public health nurse, with duty station in British Guiana, who will furnish consultant services initially to the Governments of Trinidad, Barbados, and British Guiana, and later to other health departments as the program develops.

BRITISH GUIANA AND WEST INDIES-4, PAHO Public Health Administration Fellowships (See page 116)

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

JAMAICA-2, Malaria Eradication (See page 116)

The malarious area of the island covers 10,050 square kilometers and the population at risk is 1.3 million.

The geographical reconnaissance of the malarious areas was completed in January 1958, with 320,000 houses mapped and numbered. The total coverage with dieldrin residual house-spraying started in January 1958 and by 31 October 234,400 houses had been sprayed.

The evaluation network is now being organized with the collaboration of the district medical officers. Investigation to determine whether or not there is transmission of malaria in areas above 1,500 feet (approximately 25,000 houses) is now well advanced. The information so far available indicates that there is no transmission, and if this is confirmed, the area will be placed under surveillance.

As of December 1958, the principal and perhaps sole vector in three central parishes in the south has been found to be resistant to dieldrin. It is therefore planned to change to DDT.

UNICEF provides insecticides, transport, laboratory and spraying equipment. The Government is committed to \$1,548,426 for the campaign.

Provision is made for one medical officer, one sanitary engineer, and two sanitarians. Provision is also made for anti-malarial drugs, a vehicle for the international staff, fellowships in 1959 and 1960, and other items of imported equipment and supplies not furnished by UNICEF.

JAMAICA-4, University College of the West Indies (See page 118)

The University College of the West Indies is undertaking a progressively larger share of the responsibility for training young physicians to work in the Caribbean. There is at present a sub-Department of Preventive Medicine

to which assistance is being given by the Rockefeller Foundation up to 1960.

It is planned to enlarge the scope of this sub-Department of Preventive Medicine and ultimately to give it the status of a full Department. Provision is made in 1961 for a consultant in the teaching of preventive medicine and the organization of such a department, as well as for teaching supplies and equipment.

JAMAICA-11, Public Health Training Station (See page 118)

With assistance from the Rockefeller Foundation and the Colonial Welfare and Development Organization, since discontinued in accordance with previous agreements, the Government of Jamaica established a Public Health Training Station to prepare sanitary inspectors and public health nurses to serve Jamaica and some of the islands of the British West Indies. Formation of the Federation of the West Indies will make much heavier the demand on the Training Station. Furthermore, as rural health services expand, the need for more and better trained sanitary inspectors and public health nurses becomes critical.

The Regional Adviser for Public Health Nursing has assisted in a review of the curriculum, teaching practices, staff functions, etc. Partly as a result of this two fellowships were awarded in 1958 to the two nursing tutors at the Station. A third tutor will be appointed in 1959.

To provide parallel services on the sanitary inspector side, provision is made for a 3-month short-term consultant in 1959. Advisory services will also be provided by the zone staff on a continuing basis.

Provision is made for consultants in 1959-1961.

JAMAICA-12, Nursing Education (See page 118)

The great expansion of preventive and curative services has outstripped the supply of nursing personnel in Jamaica. There are over 20 schools of nursing attached to the various hospitals on the island but their training programs have not hitherto been coordinated and nursing preparation and experience lacks uniformity.

A review has been initiated, with assistance from the Organization, of the existing functions of nursing personnel.

Provision is made for the services of a nurse educator, beginning in 1960, to assist in reorganizing and coordinating the teaching programs throughout the Island. Provision is also made for one fellowship in 1960.

TRINIDAD-3, Malaria Eradication (See page 118)

Malaria in Trinidad and Tobago has been sharply reduced following the residual DDT house-spraying program. In Tobago, there have been no indigenous cases since December 1953. In Trinidad the bulk of transmission occurs in the northeastern sector of the island where A. bellator is the vector. In 1958, a pre-eradication program was initiated, with intensification of residual spraying with dieldrin and the distribution of antimalarial drugs. By 31 October 1958, 89% of the total number of houses in the malarious areas were sprayed. Malaria incidence has been reduced greatly, but malaria transmission in the A. bellator area has not been terminated.

A. aquasalis, the only other known vector, was found to be resistant to dieldrin but remains susceptible to DDT. It is planned to eradicate malaria from Trinidad by DDT residual house-spraying in areas where A. aquasalis is the sole vector and by chemotherapy in the area where A. bellator is a vector. It is believed that comprehensive and regular administration of antimalarial drugs to the population exposed to A. bellator will eliminate malaria transmission from the area. This plan will be put into effect during 1959 and will be continued until December 1962. A complete evaluation network is being organized and will function from the beginning of the campaign.

UNICEF is expected to continue to provide insecticides, transport, spraying and laboratory equipment. The Government is expected to contribute \$293,030 in 1959, \$337,770 in 1960 and \$344,770 in 1961.

Provision is made for travel grants in 1959 and 1960 and for antimalarial drugs. Advisory services will be available through the Zone Advisory Team (AMRO-117).

TRINIDAD-6, Public Health Legislation (See page 118)

The public health laws of Trinidad needed thorough revision in order to keep pace with the expansion and modernization of the public health services of the island. The Organization provided in 1957 and 1958 the services of a consultant to make a preliminary survey of the situation and to assist in a complete revision of the present health legislation, in the unification and modernization of the health ordinances, and in the preparation of a new sanitary code. This assignment will be completed in 1959 by a third visit.

WINDWARD ISLANDS-2, Malaria Eradication (See page 120)

Malaria eradication programs in St. Lucia (started in January 1956) and in Grenada (started in February 1957) are now well advanced. Except for a few circumscribed foci of malaria transmission which produced a few cases of malaria during 1958, transmission has been virtually interrupted. Active case finding, through networks of government clinics and evaluators, is operating with increasing efficiency, and it is believed that malaria eradication will be achieved by 1960. UNICEF has provided insecticides, transport, laboratory and spraying equipment.

The malaria problem in Dominica is confined to one district of the island and the level of transmission is very low. A plan was made in 1958 to spray the houses in the malarious district with DDT for three years beginning in January 1959. It is expected to achieve malaria eradication within three years. UNICEF will provide insecticide and transportation.

Provision is made for two sanitarians; antimalarial drugs, and vehicles for international personnel. The Zone Advisory Team (AMRO-117) will provide supporting services.

FRENCH ANTILLES AND GUIANA

FRENCH ANTILLES AND GUIANA-2, Aedes aegypti Eradication (See page 120)

The purpose of this project is to eradicate the vector of urban yellow fever, A. aegypti, so that the Antilles-Guiana area will no longer be receptive to yellow fever.

French Guiana has eradicated A. aegypti, but infestation still persists in Martinique, Guadeloupe and the other islands in this group.

A sanitarian is assigned to the campaign in Guadeloupe and in St. Martin, where work began late in 1958 in conjunction with the Dutch part of the island.

Provision is made for continuing the services of the sanitarian. The medical officer of the regional project AMRO-8 provides the general technical guidance and supervision.

FRENCH ANTILLES AND GUIANA-3, PAHO Public Health Administration Fellowships (See page 120)

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

SURINAM AND NETHERLANDS ANTILLES

SURINAM-1, Malaria Eradication (See page 120)

The malarious area in Surinam covers 143,470 square kilometers, and the population at risk is estimated to be 165,000. The Malaria Eradication Program started with the geographical reconnaissance of the coastal area which was completed in April 1958, with 32,722 houses numbered and mapped. The original plan calls for semi-annual cycles of DDT residual house spraying in the coastal and savannah areas for three and one-half years, and one cycle annually of dieldrin spraying in the interior for four years. As of 31 October 1958, the first cycle was completed in the coastal and savannah areas with 30,853 houses sprayed. In the interior the first cycle is in progress and up to 31 October 2,534 houses (50% of the estimated total) had been sprayed. The participation of collaborators in the evaluation activities has been very satisfactory. Efforts are now being made to establish a good evaluation network throughout the country. Antimalarial drugs are administered to the population living along the rivers in the interior, at the same time as the houses are sprayed, as an additional measure to halt transmission of falciparum malaria, the only species so far found.

UNICEF is expected to provide insecticides, transport, laboratory and spraying equipment. The Government plans to spend US\$510,000 in the campaign.

Provision is made for one medical officer and two sanitarians and for antimalarial drugs, vehicles for international personnel, and items of imported supplies and equipment not furnished by UNICEF. The Zone Advisory Team (AMRO-117) will provide supporting services. Fellowships are provided in 1959.

SURINAM AND NETHERLANDS ANTILLES-1, Aedes aegypti Eradication (See page 122)

The purpose of this project is to eradicate the urban yellow fever vector, A. aegypti, from Surinam and the six islands of the Netherlands Antilles, so that the area will no longer be receptive to yellow fever.

Eradication has been achieved in Aruba. In Curaçao, reinfestation occurred in a localized area of Willemstad and assistance was given in reorganizing the staff and intensifying measures to meet the situation. In Bonaire,

the work is far advanced, and negativity has already been obtained; the routine surveillance period is being observed before a formal declaration of eradication. An intensive drive was assisted and directly supervised by WHO sanitarians in the Lesser Netherlands Antilles, and the program is far advanced, with negativity near achievement in Saba and St. Eustatius. Work in St. Maarten is now in progress in the entire island. Surinam is still infested, and the information available indicates resistance of *A. aegypti* there to DDT. Assistance is planned for Surinam in 1959-1961.

Provision is made for the services of two sanitarians, one of which will be added in 1960. Consultant services will be provided by the medical officer in project AMRO-8.

SURINAM AND NETHERLANDS ANTILLES-2, PAHO Public Health Administration Fellowships (See page 122)

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

VENEZUELA

VENEZUELA-1, Local Health Services (See page 122)

This program terminated at the end of 1958 and provision is made in 1959 to cover home leave entitlement of the consultant prior to transfer to another project.

VENEZUELA-2, Mental Health (See page 122)

To assist the Government of Venezuela in evaluating its present program and objectives in mental health in the light of needs and resources, provision is made for a short-term consultant in 1959.

VENEZUELA-5, Onchocerciasis Investigation (See page 122)

Onchocerciasis has been known to be prevalent in Venezuela for some time but its extent has not yet been defined exactly nor have the actual and potential vectors been identified.

To assist in a survey to determine these facts provision is made for a short-term consultant for two months.

VENEZUELA-9, PAHO Public Health Administration Fellowships (See page 122)

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

VENEZUELA-11, Plague Investigation (See page 122)

In recent years the Organization has collaborated in studies on plague in Bolivia, Ecuador, and Peru, between 1953 and 1956, and in Brazil, in 1957 and early 1958. In 1959 the Organization is collaborating with the Venezuelan Government in similar studies by the provision of the services of a short-term consultant.

VENEZUELA-13, Treponematoses Eradication (See page 122)

Precise data on the extent of yaws in Venezuela are not available, although it is known that the disease is not widespread and that it exists only in certain areas of the country.

To advise on plans for achieving eradication of the disease, through over-all coverage of the endemic areas and penicillin treatment of cases and contacts, provision is made for short-term consultants in 1960 and for a medical officer in 1961.

VENEZUELA-14, Nursing Education (See page 124)

In recent years the development of public health services in Venezuela has been extraordinary, but nursing education has not followed the same rapid pace. The National School of Nursing raised its educational entrance requirements in 1957 to three years of secondary studies and in 1959 plans to make full secondary studies a requirement.

A consultant reviewed the situation in 1958 and the report has been accepted for implementation in 1959-1961, including the broadening of the nursing curriculum and the strengthening of the teaching of public health nursing and nursing auxiliaries.

Provision is made for a nurse educator and for fellowships for the period 1959-1961.

VENEZUELA-15, Health Aspects of Nuclear Energy (See page 124)

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.

A long-term fellowship is provided in 1960 and 1961 for the purpose of training national technicians in the health aspects of nuclear energy.

VENEZUELA-16, *Aedes aegypti* Eradication (See page 124)

A. aegypti is present in principal cities of Venezuela including the capital, which has a high index of infestation.

The reorganization of the campaign began in the middle of 1958, and the Organization has provided the services of a medical officer and three sanitarians. In 1959 field operations will start in Caracas and other principal cities and in the area near the Colombian border, where the reintroduction of the *A. aegypti* to Colombia from Venezuela has been observed on numerous occasions.

Provision is made for one medical officer and three sanitarians.

VENEZUELA-17, Medical Education (See page 124)

There are three well-established university medical schools in Venezuela, located in Caracas, Maracaibo and Mérida, with a fourth starting in Valencia and a fifth

contemplated in Ciudad Bolívar. Preliminary visits have been made to the three established schools by the staff and consultants of the Organization. The universities are to become autonomous and the medical schools will come under a National Council whose role it will be to determine and coordinate curricula and teaching standards and practices.

The Organization has been requested to provide the technical assistance and consultation by PAHO's regular staff and by special advisers in particular fields.

Two fellowships were awarded in 1958 to key staff from the Mérida school. Senior staff from Caracas, Maracaibo and Mérida participated in the Seminar on the Teaching of Pediatrics (AMRO-102) in Paipa, Colombia, in 1958. Provision is made for consultants and fellowships in 1960 and 1961.

VENEZUELA-18, National Institute of Hygiene
(See page 124)

Maintenance of colonies of various laboratory animals present many difficult problems for the modern public health laboratory because of the variety and particular characteristics of animals needed both in diagnostic services and in production of biologicals. In addition to need for advice on this subject the National Institute of Hygiene is expanding its activities in virology, a field which involves highly specialized techniques.

Provision is therefore made for consultants on these two matters.

VENEZUELA-19, School of Public Health (See page 126)

For some years a school of public health has been operated as part of the Ministry of Health of Venezuela for the training of nationals. It has been decided to transfer the school to University auspices and to give it full university rank. In 1959 the Organization made available the services of a short-term consultant to review the situation and advise on proper steps to be taken in connection with the transfer and changes of responsibilities of the school. In 1960 and 1961 provision is made for short-term consultants and a fellowship each year for training of faculty members.

VENEZUELA-20, Public Health Aspects of Accident Prevention
(See page 126)

In Venezuela one of the leading causes of death is accidents, particularly traffic accidents. It is proposed to make an epidemiological study of this problem and for this purpose provision is made for the travel of a short-term consultant on loan from the U.S. Public Health Service.

INTERCOUNTRY PROGRAMS

AMRO-8, *Aedes aegypti* Eradication (Caribbean)
(See page 126)

Under this regional project one medical officer provides advisory services in relation to *A. aegypti* eradication to the health authorities of Venezuela and of the British, French, and Netherlands areas, and gives technical guidance and supervision to international consultants assigned to the country projects British Guiana and West Indies-1, French Antilles and Guiana-2, Surinam and Netherlands Antilles-1, and Venezuela-16.

AMRO-47, Yaws Eradication and Public Health Laboratory Services (Caribbean) (See page 126)

With the end of the intensive phase in Trinidad-Tobago in 1958, the mass treatment of yaws in the areas of high prevalence rates which also included Dominica and St. Lucia was accomplished.

At present, and necessarily for several years to come, resurveys or consolidation coverages will be conducted in Dominica and Trinidad-Tobago with the same teams that did the initial treatment survey, to find and treat active cases and their contacts.

In St. Lucia, St. Vincent and Grenada, the search for active cases and treatment are done by teams also responsible for other public health activities, since the limited number of cases now found does not justify, economically, the exclusive use of personnel.

In St. Kitts, Nevis, Anguilla, no house-to-house visits are now being made, but the health centers throughout the three islands are on the alert. Trained personnel who detect any case of yaws report it for investigation and treatment if necessary.

In the areas already treated, permanent surveillance is necessary in order to discover new cases that might appear, whether imported or otherwise. It is planned to establish a mechanism for accurate diagnosis of suspicious and doubtful cases.

In keeping with the concept of eradication, the activities of this project must now be expanded to other areas where yaws is known to exist. Surveys are necessary to evaluate the magnitude of the problem and to decide what measures should be taken to attain eradication of this disease from the Caribbean.

Jamaica constitutes an important area where cases of yaws continue to be reported. In this island the problem may well be solved along the same lines as that of Trinidad, namely with the selection of the zones of high prevalence for mass treatment, while increased facilities for diagnosis and free treatment are provided in the rest of the island.

This project also has the corollary objective of strengthening laboratory services, not only in relation to the treponematoses and venereal disease program, but also in regard to public health services in general. Assistance continued to be given to the public health laboratories in the different islands, in order to improve and standardize their techniques and procedures. On special consultant has visited all these laboratories for appropriate periods of time, advising on organization and on laboratory procedures. Personnel of these laboratories have been given in-service training and limited amounts of equipment and supplies have been provided by UNICEF.

The laboratory adviser will be stationed during 1959 in Georgetown, British Guiana, where a new public health laboratory is to be established. At the end of the year this consulting service is to be discontinued, since it is believed that the whole area will have adequate laboratory services and advice provided from units within the area itself.

Provision is made for the services in 1959 through 1961 of a medical officer to stimulate the surveillance activities and eradication work of this project.

AMRO-95, Environmental Sanitation (Caribbean) (See page 126)

Major public health problems in the Caribbean area are related to diseases that can be prevented largely by sanitation of the environment. Expanded programs give special attention to the survey and evaluation of environmental sanitation conditions and to their improvement. Emphasis is being placed first on water supply, excreta disposal and health education. Later, programs will include urban sewage disposal, garbage and refuse disposal, rodent control, food sanitation, and housing.

This project serves French Guiana, British Guiana, Surinam and the British, Dutch and French islands of the Greater and Lesser Antilles.

A survey and a program proposal for St. Kitts, Nevis and Anguilla were completed in 1955. In 1956 a public health engineer was assigned to initiate that program and extend the service to other islands of the Caribbean. He was assisted beginning in 1957 by a sanitarian.

Surveys were made during 1956 in Barbados, St. Lucia, St. Vincent, and Trinidad-Tobago, and in 1957 in Antigua-Barbuda, Montserrat, and Grenada; program proposals were prepared for Dominica, St. Lucia, St. Vincent, and Trinidad-Tobago. Programs have been implemented in Barbados and St. Kitts-Nevis-Anguilla.

In 1958 assistance continued to Barbados and St. Kitts-Nevis-Anguilla, and programs will start in 1959 in St. Lucia, St. Vincent, and Trinidad-Tobago. Program proposals for Antigua-Barbuda, Montserrat, Grenada, the British Virgin Islands and British Guiana have been prepared for implementation in 1959 and 1960.

In 1959 it is planned to initiate surveys in the remaining parts of the Federation of the West Indies and to prepare program proposals for Dominica and Surinam.

In 1960 and 1961 it is planned to assist and expand programs already in operation, to propose programs for Jamaica and Martinique, and to make preliminary surveys of Guadeloupe, French Guiana, and the Netherlands Antilles.

Fellowships have been awarded for the training of key staff in Barbados, St. Vincent, St. Lucia and St. Kitts.

Provision is made for one sanitary engineer and two sanitarians.

AMRO-117, Malaria Technical Advisory Services (Zone I) (See page 128)

This project provides for a Zone Advisory Team for the malaria activities in the Caribbean to advise and assist international personnel assigned to country projects, as well as give assistance in the widely scattered islands, which individually are too small to require full-time international personnel.

Provision is made for one Chief Zone Malaria Adviser, one sanitary engineer, one administrative methods officer, one laboratory adviser, one entomologist, one epidemiologist who will be assigned to the Windward Islands initially, one sanitarian and a secretary. These staff members will give advice and services in their respective specialties.

Provision is also made for supplies, equipment and common services.

AMRO-134, Training Center for Malaria Eradication (Kingston) (See page 128)

This training center has been established in collaboration with the Government of Jamaica and the U.S. International Cooperation Administration, as part of a major effort to train national and international personnel for malaria eradication. It is one of four centers being used for this purpose.

It is planned to hold annually, as required, courses of twelve weeks' duration each for senior officials working in malaria eradication programs, and courses of eight weeks' duration each for sanitarians. Facilities are available for training about 25 students per course. During 1958, 67 physicians, engineers, entomologists and sanitarians completed courses.

Provision is made for a Chief of the Training Center, two sanitarians, and an administrative officer, three secretaries, and a chauffeur-messenger. Provision is also made for teaching in various specialties by visiting lecturers. Supplies, equipment, and common services are provided also.

ICA provides the services of one entomologist (Associate Director), one engineer, and one sanitarian.

The Ministry of Health provides space and laboratory facilities in the Public Health Training Station of the West Indies.

AMRO-157, Health Statistics (Zone I) (See page 128)

The functions of the statistical consultant proposed for the countries of Zone I are: (a) to give advice 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 render assistance 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 phases of projects and assist in the compilation and analysis of information in the countries for purposes of program planning.

Provision is made for one statistician, beginning in 1959.

AMRO-204, Environmental Sanitation Training (Zone I) (See page 128)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is now being divided into Zone projects. The fellowships will be awarded for training largely in the schools of public health in Brazil, Chile, and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1960 and 1961.

PART III

ZONE II

Zone Office (See page 130)

For text see "Zone Offices," page 16.

CUBACUBA-1, Aedes aegypti Eradication (See page 130)

Practically the entire territory of the Republic of Cuba appears to be infested with *Aedes aegypti*, exceptions being found only in the region of the Sierra Maestra.

Limited measures against the *A. aegypti* are already being carried out in Cuba, but operations had been limited to the Province of Havana. Up to 31 October 1958, 279,653 houses had been inspected and 68,428 had been treated. In 1959 the Government decided to expand the campaign so as to include the entire country, and a new agreement was concluded with the Organization.

The Government is committed to provide \$840,000 annually over a four-year period for this program. It is proposed that the Organization provide the services of one medical officer and one sanitarian as well as certain essential supplies and equipment.

CUBA-3, Public Health Services (See page 132)

The ultimate purpose of this project is to ensure a fully adequate distribution of public health services throughout the Republic of Cuba.

A type of organization is proposed which envisages that for each of a number of well-defined districts there be a Health Unit. The various Health Units will be responsible for basic activities in such fields as communicable disease control, maternal and child health, environmental sanitation, etc. The strengthening of the National Department of Public Health at the central level is considered necessary in order to facilitate progress towards the realization of this plan.

The first step is to select a representative area of the country (to include both urban and rural populations) where coordinated services will be developed. Both professional and auxiliary personnel with special training in public health are to be used. It is intended that experience acquired in the operation of services in the pilot area will serve as a basis for their gradual extension to the rest of the country.

Provision has been made for the services of one medical officer in 1959. It is expected that there will be a need for a team of a medical officer, a public health nurse and a sanitary engineer in 1960 and 1961.

CUBA-4, Nursing Education (See page 132)

For some time the Government has been interested in establishing a new school of nursing to be operated according to modern standards and adapted to the country's needs and resources. A building designed to house this school is nearly completed. Interest has also been expressed in the

need to devise plans for reorganizing and modernizing the curricula of existing schools of nursing.

The primary purpose of this project is to aid in the development of the new school but assistance will also be given in up-grading schools of nursing which are already in operation.

Short-term fellowships will be provided for each of a selected group of nurses to visit a well-organized school of nursing in some other Latin American country, where they would observe the administration of the school and study its teaching plan. It is anticipated that on their return they would form the nucleus of a faculty for the new Cuban school of nursing.

A nursing consultant will aid in formulating and putting into operation a plan for the organization of the new school of nursing as well as short-term courses in teaching and supervision to prepare other graduate nurses as instructors and supervisors.

This project is expected to extend over a period of five years. Provision is made for a nurse educator, supplies, equipment and fellowships in 1960 and 1961.

CUBA-5, Malaria Eradication (See page 132)

The existence of various foci of malaria in Cuba, particularly in the provinces of Pinar del Rio and Oriente, is known. However, the actual extent of the malarious areas of Cuba as well as the number of houses which would require spraying has not been ascertained.

Initially, this project provides for a survey to determine essential epidemiological facts and the total number of houses to be sprayed. A detailed plan of operations will be drawn up on completion of the survey.

As a result of negotiations undertaken with the Government in January 1959, the Ministry of Public Health is already committed to \$88,000 to finance the survey referred to above.

In 1959, five nationals will attend training courses on the techniques of malaria eradication and will be available to work with the program as it develops.

During the first year of operations, PAHO will provide the services of a medical officer and other necessary technical personnel. The Organization will also supply one vehicle as well as fellowships. The budget for 1960-1961 will be revised upon completion of the survey when actual needs are known.

CUBA-6, PAHO Public Health Administration Fellowships (See page 132)

A reorganization of the public health services of Cuba was initiated in 1959. It is evident that with these changes there will be an acute and growing need to train additional public health personnel of all categories.

To provide opportunity for advanced study abroad provision has therefore been made for the award of fellowships in 1959, 1960, and 1961.

CUBA-9, Waterworks Training Course (See page 132)

In recognition of the great importance attached to the proper operation of water supply systems as it relates to public health, a national short course for the training of water plant operators is planned for 1959.

The purpose of the project is to train water works operators in methods of getting better results from existing installations, improving the quality of water and bettering maintenance.

The Organization is furnishing two specialized consultants and limited equipment for laboratory demonstrations in 1959.

DOMINICAN REPUBLICDOMINICAN REPUBLIC-2, Malaria Eradication (See page 134)

The first year of total coverage began on 16 June 1958 by which date most necessary national personnel had been trained either abroad with PAHO fellowships or locally. By 15 December a total of 180,638 houses had been sprayed. Epidemiological studies have been completed and procedures laid down for the establishment of protective barriers applying to Ciudad Trujillo and Puerto Plata.

Epidemiological and geographical reconnaissance undertaken before the beginning of spraying operations in the Dominican Republic appeared to indicate that the country's malaria problem directly affected an area of about 41,000 square kilometers and a population of 2,417,000 inhabiting some 403,000 dwellings. However, more refined studies initiated during the latter part of 1958 and continuing into 1959 have shown the need for certain adjustments in these figures.

UNICEF is contributing insecticides, vehicles, spraying equipment and other necessary supplies. The Government's contribution to the program will amount to about \$500,000 annually for 1960 and 1961.

Provision is made for a medical officer, a sanitary engineer and three sanitarians. Antimalarial drugs and fellowships were supplied for the program in 1959.

DOMINICAN REPUBLIC-3, Nursing Education (See page 134)

A new school of nursing was established in the Dominican Republic in August 1958 after several years of planning. A nurse-director, assistant-director and several instructors have been appointed for the school. Orientation of faculty instructors on methods and principles of teaching had been undertaken by the end of 1958 and the outline of a three-year educational program for professional nurses has been drawn up. The first group of students began their training in October 1958.

The curriculum of the school is being developed in such a way that nurses completing their course of training will be adequately prepared to meet the needs for nursing services in the rapidly-expanding hospital system and in other health projects.

The Government is contributing \$80,000 annually to the project, which is expected to extend over a period of at least five years.

Provision is made for two nurse educators and for fellowships.

DOMINICAN REPUBLIC-4, Public Health Services (See page 134)

Accomplishments in this collaborative project for reorganization of local health services and the strengthening of the central administrative structure, reported previously, have included: approval of a new sanitary code and corresponding regulations; construction and operation of a well-equipped health center serving also as a training area; six courses for nurses, nursing auxiliaries, sanitarians and other specialized personnel, in addition to a special orientation course for physicians working in local health services; and operation of a new health center in Ciudad Trujillo, which is being equipped in 1959.

Major developments in 1958 may be summarized as follows: establishment of a modified Division of Communicable Disease Control, with increased technical personnel already fully trained; creation of a Division of Health Education under the direction of a former PAHO trainee; creation of a Vital Statistics Section; and establishment of sub-centers operating in the rural areas of San Cristobal.

Plans are under way for the construction of a new health center in Ciudad Trujillo in 1959. During 1960 and 1961 new health centers will be organized in other areas of the Republic.

UNICEF has supplied a part of the equipment required for the San Cristobal Health center. The major portion of the equipment and supplies for maternal and child health services in the rural areas and for the expansion of work in rural sanitation is also being provided by UNICEF. The Government's contribution is estimated to be about \$450,000 for 1960 and \$500,000 for 1961.

Provision is made for continuing the services of a medical officer, a sanitary engineer, a health educator and a public health nurse. Fellowships and supplies will also be provided.

DOMINICAN REPUBLIC-8, *Aedes aegypti* Eradication (See page 134)

The purpose of this project is to eradicate the urban yellow fever vector, *A. aegypti*, from the Dominican Republic so that the country will no longer be receptive to yellow fever.

At the time the program was started in 1952, *A. aegypti* infestation in the country was considerable. The results of the campaign have been satisfactory in 1958. *A. aegypti* has already disappeared from many areas in the country, but is still present in Ciudad Trujillo where it constitutes a major problem. It will therefore be necessary to continue the *aegypti* eradication activities until this mosquito is eliminated from the country.

Provision is made for a medical officer and a sanitarian.

DOMINICAN REPUBLIC-10, BCG Vaccination (See page 136)

In the latter part of 1958, with the cooperation of the Organization and UNICEF, a mass BCG vaccination campaign was undertaken and is scheduled to be completed by the end of 1960.

Representing a direct outgrowth of the BCG vaccination campaign and consolidating its results a nation-wide control program will be developed in stages. It will be based on the utilization of modern drugs and will follow the methods and techniques of case-finding, ambulatory treatment, and chemoprophylaxis of contacts.

Provision is made in 1959 for short-term consultants to assist in planning continued operations of the program.

DOMINICAN REPUBLIC-11, PAHO Public Health Administration Fellowships (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.

DOMINICAN REPUBLIC-14, Medical Education (See page 136)

In order to modernize its curriculum and organization the medical school of the national university wishes to carry out a full review of its curriculum, of its physical facilities, and of the training of its faculty members. Following a planned survey it is proposed that leading members of the faculty should be awarded fellowships and travel grants. Provision is made for fellowships in 1960.

DOMINICAN REPUBLIC-52, Venereal Disease Control (See page 136)

Three major problems are covered by this project: (a) venereal disease control; (b) yaws eradication; (c) strengthening of the public health laboratory, specially its serological section.

Although yaws still exists in the country, its incidence and prevalence are rapidly decreasing as a result of an intensification of operations made possible by a larger contribution from the Government. The picture is also improving as far as venereal disease is concerned, due largely to efforts directed toward the training of personnel and to the more effective coordination of activities, particularly in the larger cities, including development of a five-year plan.

During the year 1958 the Government augmented the number of personnel available as well as the transportation facilities for the yaws eradication service. The total number of persons treated between 1 January and 30 November 1958 was 314,785 as against 146,151 for the whole of 1957. It is expected that by the end of 1959 the entire country will have been covered by the first nation-wide operations. Plans are already under way to organize random-sample surveys and surveillance procedures. Meanwhile, four teams are at work checking results in areas already covered.

Five training courses, with a total of 197 participants, were arranged in 1958 for general medical practitioners. A manual of venereal disease control has been prepared. The laboratory for serological diagnosis of syphilis is being upgraded.

The Government is contributing \$113,000 to the project in 1960 and \$150,000 in 1961.

Provision is made for the services of one medical officer and one serologist.

HAITI

HAITI-1, Yaws Eradication (See page 136)

In July 1950, this project was begun as a joint enterprise of the Government, UNICEF and the Organization, to eradicate yaws, which was considered to affect between 50% and 70% of the entire rural population.

By the end of 1957 mass operations had been completed and in 1958 a system was established to check remaining cases and institute an adequate survey system.

Between July 1950 and December 1958, 3,419,189 persons were examined and treated; 1,273,632 cases of yaws were discovered.

Random-sampling has confirmed that the present level of infectious yaws is even lower than anticipated. Approximately 500 cases of infectious yaws remain which are expected to be covered by the end of 1959.

A reporting net-work has been organized and has proved effective, receiving cooperation from private physicians, the army, religious orders and other interested groups.

UNICEF has contributed equipment and supplies in the past, and will continue providing penicillin as required.

Provision is made for two medical officers in 1959 and 1960, two sanitarians in 1959 and one in 1960, and one medical officer in 1961.

HAITI-4, Malaria Eradication (See page 138)

The malarious areas of Haiti cover a total of approximately 21,000 square kilometers and the population at risk is nearly 2.9 million. Geographical reconnaissance in 1958 indicated approximately 750,000 houses requiring spraying annually.

The first annual cycle of total coverage with residual insecticides was inaugurated on 1 September 1958. By the end of the year, a series of special epidemiological studies had been conducted in order to obtain additional data clarifying the malaria profile. Earlier in the year, the training of personnel had been completed and the organization of central as well as zone and sector offices and of spray brigades had been established.

Because of special local conditions PAHO acceded to the Government's request that the Organization assume responsibility for directing operation of the malaria program in Haiti, in addition to supplying advisory services, supplies and fellowships.

The Government had been committed to contribute \$745,000 annually to the project, while UNICEF was providing equipment and supplies. The US International Cooperation Administration supplied vehicles during the first year.

However, operations in the malaria eradication program were suspended at the request of the Government on 30 January 1959. Negotiations are continuing in the hope that the program may be resumed as early as possible.

Assuming that there will be early resumption of operations, provision has been made for the services of a

Chief Country Malaria Adviser, a medical officer, a sanitary engineer, a health educator, a statistician, four sanitarians, and four administrative staff members. Operational assistance and fellowships were provided in 1959.

HAITI-9, Public Health Laboratory (See page 138)

The public health laboratory, after playing an important role in the conduct of serological studies for the yaws eradication program, was expanded, installed in new premises and its activities reorganized.

The objective of this project is to make possible the extension of the laboratory's activities to other branches of public health (including epidemiological studies of bacterial and viral diseases) and to institute regular measures for the control of foodstuffs and beverages.

Provision is made for an adviser on the administrative and epidemiological aspects of public health laboratory work.

HAITI-12, PAHO Public Health Administration Fellowships
(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.

HAITI-14, *Aedes aegypti* Eradication (See page 138)

In November 1958 this program was suspended indefinitely on the request of the Government owing to financial difficulties.

Provision is made for remaining closing costs in 1959.

HAITI-16, Public Health Services (See page 138)

Over the past several years the Organization has cooperated with the Government of Haiti in a number of specialized programs such as those directed against yaws, syphilis and malaria. Assistance has also been given in the training of numerous public health personnel. The present project envisages close collaboration with the Government in expanding the basic organization of national, provincial and local health services.

The project was inaugurated in late 1957 when a medical officer was assigned to cooperate with a National Committee on Health Planning which had participation of representatives of the Organization and of the US International Cooperation Administration. The purpose of the National Committee was first, to study the health needs and resources of the country and second, to prepare a long-range plan which would guide the coordination, expansion and strengthening of health services at the various administrative levels.

The first tasks undertaken by the National Committee were to study possible reorganization of the Ministry of Public Health and of the School of Medicine. Plans are also to be drawn up for the demonstration of local health services, sanitation and strengthening of services for sanitary inspection. A particularly important aspect of the project will be to assist in providing training opportunities for key national personnel in the various public health specialties.

Provision is made for the services of a medical officer to which will be added the services of a sanitary engineer and a public health nurse in 1960. Fellowships and supplies will also be provided.

HAITI-19, Medical Education (See page 138)

A special national committee has been functioning since 1957 to deal with the questions of reorganizing the curriculum, modernizing the teaching methods and strengthening the teaching staff of the national medical school. Already in effect are a number of measures recommended by a consultant who visited the country in 1956 and by an advisory group convened in October 1956 with the participation of various governmental and non-governmental international agencies.

Seven fellows received specialized training abroad during 1958, of whom four were the recipients of PAHO/WHO awards.

The first visiting professor (Physiology) provided by the Organization took up his duties early in 1959. Provision is made for the services of a second visiting professor, Professor of Microbiology, as well as for fellowships in 1960 and 1961.

MEXICO

MEXICO-14, Nursing Education (See page 140)

Over a period of several years, the Organization has cooperated with the Government of Mexico in a program designed to modernize basic nursing and nurse-midwifery education in collaboration with the National University.

In 1958, the program was extended to provide consultation for the assistance given by the Ministry of Health to schools of nursing throughout the country which meet certain required standards. The number of these schools is now 10 out of the 60 schools of nursing in Mexico.

At the outset advisory services were supplied by the Zone nurse and in October 1958 a full-time nurse educator was assigned to the Direccion de Estudios Experimentales, responsible for this special program.

Seminars and courses for nurses assigned as instructors in these schools of nursing will be developed in 1959. Later, plans will be made to offer courses in administration and supervision. Periodic visits by the Consultant and her counterparts will be made to the cooperating schools for the purpose of evaluation and guidance.

Provision is made for one nurse educator and for fellowships.

MEXICO-15, State Health Services (See page 140)

In the rural areas of eight states of Mexico an attempt has been made to reduce maternal and infant death rates through the development and improvement of health services for mothers and children within the framework of other community services.

It is now planned to extend this program to a general health program in eight states, organizing special

sanitation projects in three of these. The same pattern of establishing regional health centers staffed by full-time public health personnel, each with its auxiliary and rural centers, will be followed. The regional center in each state will be used as a training center for auxiliary personnel.

This program is being promoted cooperatively at the national and the local level. Technical cooperation is being given by the Zone Office staff.

In 1959 it is planned to provide a full-time public health nurse consultant so that more concentrated assistance may be given. Additional service will be provided by the international consultants to the project Mexico-22. Travel grants will also be furnished for key personnel. UNICEF has provided supplies, equipment, and vehicles for this project.

Provision is made for one public health nurse and for fellowships.

MEXICO-22, Public Health Services (Guanaajuato) (See page 140)

The Government of Mexico has been promoting the improvement and integration of health services at the state level. A district composed of nine municipalities was chosen in the State of Guanaajuato for the purpose of coordinating the basic health services operated and maintained by the Ministry of Public Health and Welfare and those operated by the State. The district selected has a population of 304,080 (1950 census). The infant mortality rate is 95.49 per thousand, diarrheas and pneumonia being the principal causes of death.

It is expected that results obtained from this practical study will be applied in programs for the coordination and expansion of services in the rest of the State of Guanaajuato and throughout the country.

Professional personnel have been trained abroad under the auspices of the Organization. Local courses have been organized during 1958 to train auxiliary public health nursing personnel and sanitarians.

UNICEF is providing financial assistance in support of this project.

Provision is made for a medical officer, a sanitary engineer, a health educator, a public health nurse, and a sanitarian. Fellowships for national personnel working in the district and a small sum for textbooks and technical publications will also be provided.

MEXICO-25, PAHO Public Health Administration Fellowships (See page 140)

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

MEXICO-26, Aedes aegypti Eradication (See page 142)

Suspension of the previous campaign for the eradication of *A. aegypti* in 1955 was followed in 1957 and 1958 by a mass vaccination program specially in the southeastern part of Mexico, in which PAHO collaborated by providing the vaccine.

It is now proposed to embark on a much more extensive program and the Government plans expenditures of some \$300,000 annually. In order to assist in the conduct of a preliminary survey provision is made on the part of the Organization for the services of a medical officer and a sanitarian for 1961.

MEXICO-28, Public Health Laboratory (See page 142)

The National Public Health Laboratory, recently reorganized with the collaboration of the Organization, is responsible for controlling the quality, potency and safety of drugs and biological products. It is called upon to undertake diagnostic laboratory work and to train personnel for the country's regional laboratories.

The progressive expansion of the Laboratory's various divisions including those concerned with virology makes necessary continued assistance from the Organization in the in-service training of personnel already on the staff, in the development of methods and procedures through the provision of short-term consultants, and in the award of fellowships for the training of technical personnel abroad.

Provision is made for the services of short-term consultants, fellowships and a nominal amount of essential supplies and equipment.

MEXICO-30, School of Public Health (See page 142)

The objective of this project is to strengthen teaching in the School of Public Health of the University of Mexico.

Under project AMRO-18 (Medical and Public Health Education) some faculty members of the School have already had the opportunity of visiting countries from which their students come, in order to adapt their teaching to the health organization and general conditions in those countries. Visiting professors, travel grants to professors for the observation of teaching methods and of curriculum planning in other institutions, and limited amounts of materials have also been provided to the School.

Collaboration will be continued along these lines. Specific cooperation will also be provided, beginning in 1959, with the assignment of a consultant to work with the faculty of the School in strengthening the curriculum and field training programs in public health nursing.

In addition, technical personnel of the Zone Office will cooperate with the School, in curriculum areas such as health education, environmental sanitation, health statistics, etc.

Provision is made for a nurse-educator, short-term consultants, and fellowships.

MEXICO-32, Medical Education (See page 142)

Medical education in Mexico is undergoing a period of accelerated development. Teaching is being greatly improved in the medical schools through the reorganization of curricula, the modernization of teaching methods, and the strengthening of the teaching staff. Improvement in the teaching of preventive medicine has received special attention.

Collaboration by the Organization will provide for training of teaching staff abroad, observation of medical education in other countries by deans and senior faculty members, and visiting professors and consultants.

In order to assist in the development of these activities provision is made for fellowships.

MEXICO-33, Dieldrin Toxicity Studies (See page 142)

In collaboration with the Ministry of Public Health and Welfare of Mexico the toxicological aspects of dieldrin in malaria eradication programs are being studied. Under this project, a physical examination will be given at regular intervals to a selected group of persons handling dieldrin, and a careful study and analysis will be made of results. Expenses incurred in the project will be defrayed by the National Commission for the Eradication of Malaria of the Ministry of Public Health and Welfare of Mexico with funds from PAHO.

It is expected that the studies will be completed in 1960.

MEXICO-34, Veterinary Medicine Education (See page 142)

Because of the need to orient basic veterinary education to the important aspects of public health and preventive medicine, with particular regard to zoonoses and food and drug control, it is proposed to assist the School of Veterinary Medicine with consultation services and fellowships to train faculty members abroad.

Fellowships are granted to faculty members in order to enable them to attend schools of public health, thus helping to ensure that under-graduates will be exposed to public health problems and approaches throughout their professional training. At the same time, consultant services are provided by the Veterinary Public Health Consultant of the Zone Office and by short-term consultants for the evaluation of educational programs and in the organization of special courses and seminars.

The teaching program has been strengthened and increasing emphasis is being given in it to all phases of preventive medicine and public health. A special six-month course in public health has been inaugurated. Seminars in which public health officers take an active part have been organized on a permanent basis. One immediate result of these developments has been a pronounced interest on the part of recent graduates in taking up careers in public health.

Provision is made in 1960 and 1961, as in 1959, for short-term consultants and for fellowships.

MEXICO-35, Environmental Sanitation Training (See page 144)

Shortage of trained sanitary engineers and auxiliary personnel in environmental sanitation prevails throughout Latin America and is an important factor limiting the development of sound public health programs.

In Mexico, the Organization has been cooperating for some time with the School of Public Health and the School of Sanitary Engineering in order to provide improved training facilities. During this time provision was made for fellowships, travel grants for professors of sanitary engineering, supplies, equipment and personnel.

Provision is made for short-term consultant, supplies and equipment in 1960 and 1961.

MEXICO-53, Malaria Eradication (See page 144)

The malarious areas of Mexico are estimated to cover 1.2 million square kilometers with a population of 16 million. Plans for the eradication of malaria were completed and approved in 1955. By the end of that year the Government had established a National Malaria Eradication Commission which in 1956 undertook a comprehensive program for the training of personnel, geographic and epidemiological reconnaissance, and a demonstration and test program for the spraying of 465,146 houses. Zone and field offices, logistics operations, and health education activities were also developed.

In 1956, 3,370,096 houses were numbered and placed on sketch-maps.

In 1957, 3,016,730 houses were sprayed using dieldrin or DDT with a total of 5,120,701 individual sprayings.

In 1958, 3,316,163 houses were sprayed, the total number of individual sprayings being 5,292,164.

A major development in the program has been the resistance of *A. pseudopunctipennis* in some areas to dieldrin which will therefore be used much less in 1959. There has been a considerable expansion of epidemiological evaluation operations, special emphasis being given to anopheline susceptibility tests to detect any possible further resistance.

UNICEF's collaboration is in insecticides, transport, spray and laboratory equipment for the campaign. The Government's budget for 1959 will be \$5.5 millions.

Provision is made for a Chief Country Malaria Adviser, a malariologist, a sanitary engineer and two sanitarians. Supplies, equipment, common services and fellowships will also be provided.

INTERCOUNTRY PROGRAMS

AMRO-93, Health Education (Zone II) (See page 144)

Established in October 1955, this project was created for the purpose of assisting member countries to strengthen and extend health education services of the official health agencies and related governmental and voluntary agencies which can contribute directly or indirectly to the improvement of the health level of the population concerned.

After a study of the existing situations in the various countries, advisory services have been provided through Zone and project staff to national health authorities in determining health education needs, methods of meeting them, with particular reference to training personnel and developing health education materials.

Provision is made for a health educator and supplies and equipment in all three years.

AMRO-114, Training Center for Malaria Eradication (Mexico) (See page 144)

This training center has been established under a cooperative agreement with the Government of Mexico for

the training of national and international personnel for malaria eradication. It is one of four centers being used for this purpose.

The first courses in the Mexico center started in 1957 and instruction was given to 58 medical and engineering professionals and 62 technical auxiliaries. In 1958, four courses were given and 72 persons were given instruction.

Equipment for the entomology and parasitology laboratories and vehicles required for the field portion of the training have been furnished to the center.

Provision is made for a chief of the training center, a clerk and a chauffeur as well as for the payment of some local teaching staff who work directly in the practical training of the personnel.

AMRO-120, Malaria Technical Advisory Services (Zone II)
(See page 146)

This project provides for the technical reinforcement of country projects within Zone II.

Provision is made in 1960 and 1961 for a Chief Zone Malaria Adviser, a sanitary engineer, and an entomologist, a team similar to those of the other Zones.

AMRO-144, Health Statistics (Zone II) (See page 146)

The functions of the statistical consultant proposed for the countries of Zone II are: (a) to give advice 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 render assistance 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 phases of projects and assist in the compilation and analysis of information in the countries for purposes of program planning.

It is anticipated that in 1959 the health statistician will have initiated further activities directed towards the objectives which are listed above. Provision is made for the continuation of the services of this statistician.

AMRO-162, Epidemiology (Zone II) (See page 146)

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 new methods and techniques of control; (c) to coordinate the programs of eradication and 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 one epidemiologist and for supplies and equipment.

AMRO-178, Veterinary Public Health (Zone II) See page 146)

The functions of the veterinary public health advisor for the countries of the Zone are: to provide technical consultation in that field of preventive medicine concerned with food hygiene and the prevention and control of the zoonoses; to advise on the planning, implementation and evaluation of veterinary public health activities integrated into the general public health program; to assist in the selection and training of public health veterinarians, including the organization of courses and seminars; and to assist educational institutions for the training of public health veterinarians and other public health personnel.

Provision is made for a public health veterinarian.

AMRO-205, Environmental Sanitation Training (Zone II)
(See page 146)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is now being divided into zone projects. The fellowships will be awarded for training largely in the schools of Public Health in Brazil, Chile and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1960 and 1961.

purposes, an integrated public health service in a representative rural area of El Salvador. The experience gained in this project, which was to be coordinated with others aimed at improving educational, economic, and social conditions, was to serve as a basis for the gradual extension of the services to the remainder of the country.

The public health activities began in 1950 with a survey of health conditions in the area and the drawing up of a program of operations, which has been developing satisfactorily. A health and training center was established in Quezaltepeque and a series of health units and posts were established, progressively and methodically, at strategic points in order to furnish basic health services to the largest number of inhabitants possible in a selected area of the country. Services for health promotion and restoration and for disease prevention have been established or improved and continue to be expanded. During the last few years particular emphasis has been placed on environmental sanitation services, a task in which active community participation has become increasingly important. From the beginning of the project, special importance has been given to the training of the personnel required for the work in the area. By the end of 1957, 6 full-time health units and 9 health posts had been established. In the health and training center of Quezaltepeque, 5 courses in public health had been given for graduate nurses, 5 for sanitary inspectors, and 2 for auxiliaries. Personnel trained in these courses included 37 nurses, 85 sanitary inspectors, and 34 auxiliaries. Since 1954 the health and training center has been training personnel for the health services in other regions of El Salvador, and it has been used also for training personnel from other countries. Ten nurses and 4 sanitary inspectors from abroad have attended courses at Quezaltepeque and many fellowship recipients from other countries visit the area for purposes of observation, as part of their practical public health training. The Organization furnished the services of 5 consultants: 1 medical officer, 1 sanitary engineer, 1 sanitarian, and 2 public health nurses; it has also furnished equipment and supplies.

In 1958 the evaluation of the project was started and has been continued in 1959. The project will continue to be expanded to other areas of the country, and the personnel training activities, particularly with reference to public health nursing and sanitation, will be intensified.

Beginning in 1959 the Organization will reduce its advisory personnel to one sanitary engineer and one public health nurse, to assist in the consolidation and expansion of activities for training national personnel in the various fields.

EL SALVADOR-9, PAHO Public Health Administration Fellowships (See page 152)

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

EL SALVADOR-10, Planning and Organization of Hospital Services (See page 154)

The Government of El Salvador has general and specialized hospitals, located in different parts of the country. Private hospitalization facilities are also available, either in private hospitals or in special wards of the general hospitals.

The present hospital system is considered to be inadequate to meet the country's medical-care requirements, either because the services do not operate under a standard system, or because of the lack of coordination among the various institutions.

A number of studies on the subject have been made in the past by national personnel and by international consultants, who drew up recommendations on the problem. As was done in 1959, provision is made in 1960 for a medical officer to study those recommendations and to furnish technical assistance in the planning and establishment of a modern hospital system in the country.

EL SALVADOR-11, National Public Health Nursing Services (See page 154)

Since 1951 the Organization has cooperated in a project at the local level designed to improve public health services, with the view to the gradual extension of similar services to all parts of the country.

This project which terminates in 1960 served extensively to prepare all types of public health personnel. Because nursing services are an integral and basic part of public health services, preparation of nursing personnel to meet nursing service needs, was one of the principal responsibilities of the project El Salvador-5.

In order to continue to maintain a nursing staff adequately prepared 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 the regional and local levels. This is to be done by identifying the administrative, supervisory and teaching responsibilities of nursing personnel and by developing training programs so that national nurses may carry out their respective functions in these areas at all levels.

A public health nurse is provided by the Organization to assist at the national level in 1961.

EL SALVADOR-12, National Environmental Sanitation Services (See page 154)

Because of the increased activity anticipated in the field of urban water supplies within the country and the need to further strengthen the environmental sanitation services of the Ministry of Health, it is proposed to assign a sanitary engineer to advise on the program and development of a plan for work covering the entire field of environmental health within the country. Such a plan envisages assistance to all ministries of the Government concerned with provision of adequate water systems and the active participation of the Ministry of Health in the stimulation of the entire national program. At the same time due note would be taken of the rural programs and the important part of these activities must play in the comprehensive development of a sound national environmental sanitation structure.

Provision is made for one sanitary engineer from 1961.

GUATEMALA

GUATEMALA-1, Malaria Eradication (See page 154)

The malarious area covers 80,380 square kilometers, or 73.8 per cent of the country's total area, and that

zone is occupied by 1,500,000 persons, or 41 per cent of the country's total population.

The plan of operations was prepared in 1955, and the tripartite agreement signed by the Government, UNICEF, and PAHO/WHO was broadened in 1958 to include the amendment on the distribution plan for antimalarial drugs.

The first year of total coverage began in August 1956, and the second began in September 1957, using dieldrin. The third year of spraying started on 15 October 1958, DDT being used because of the fact that the resistance of the *A. albimanus* to dieldrin had been observed. That change in insecticide, in turn, led to a reorganization of the SNEM, with a resultant increase in the Service's operation costs.

In July 1958 the Government transferred the SNEM administration to the Inter-American Cooperative Public Health Service (SCISP).

It is estimated that the campaign will cost the Government about \$3,000,000. UNICEF participates in the development of the project by providing supplies and equipment.

The Organization furnishes technical advice, drugs, vehicles for the consultants, equipment and certain supplies, and fellowships for local personnel. In 1959 the personnel consists of one medical officer and one sanitarian. For 1960 one sanitary engineer and one sanitarian will be added.

GUATEMALA-6, Training of Nursing Auxiliaries (See page 154)

The 1954 nursing resources survey conducted in Guatemala revealed the following needs for the improvement of patient care in the country: (1) training of nursing auxiliaries, both those in existence and an additional 1,580; preparation of nurse-instructors to carry out this training; (2) preparation of clinical areas in order to provide adequate field learning experience for nursing students; (3) improvement of head nursing and supervisory techniques in the clinical areas; and (4) strengthening of the basic nursing education resources.

These became the objectives of a project initiated in 1956 which has trained 222 nursing auxiliaries. Fourteen instructors have also been prepared of which four were fellows from other Latin American countries. Some consultation services were given the school of nursing and a course for training nursing auxiliaries is being planned for the Department of Jutiapa. A third course for Nurse-Instructors has been initiated. Its enrollment includes 8 national graduate nurses and 7 WHO fellows from Latin America.

It is planned to intensify collaboration with the National School of Nursing and continue the training of auxiliaries and their instructors. Provision is made for one nurse educator, for fellowships, and for supplies and equipment in 1960 and 1961.

GUATEMALA-8, Public Health Services (See page 156)

Since 1954 the Organization has collaborated in the preparation and execution of a project to reorganize and expand the health services in rural areas of the country, to train professional and auxiliary personnel for these services, and to establish, at the central level, an organizational unit responsible for the coordination and integration of the activities of the Ministry of Public Health and Welfare.

After an initial survey in mid-1954, a plan of operations was prepared for the establishment of a model health center; a training program was drawn up for professional and auxiliary personnel; and a Division of Rural Service was established and made responsible for the training program and the operation of the health centers.

A model health unit and training center was built in Amatitlán during 1955 and has been in operation since 1956. Subcenters in Palín and San Vicente Pacaya were constructed, equipped, and put into operation in 1956.

The health center at Escuintla was remodeled and newly equipped, and the services were reorganized in accordance with the new programs of work. The health post at Llano de Animas was constructed in 1957 and equipped and put into operation in 1958.

By 1958 training through short courses and practical work was given at the Amatitlán Center to the following personnel: 33 physicians, 2 dentists, 1 laboratory technician, 26 nurses, 48 nursing auxiliaries, 5 midwives, 54 sanitary inspectors, and 2 health education workers.

In addition, a number of key personnel, including physicians, nurses, engineers, dentists, statisticians, and sanitary inspectors, received training abroad through fellowships.

Discussions were started at the end of 1958 to draw up a long-range national plan designed to expand the services and extend them to the rest of the country, taking into account the need to continue training professional and auxiliary personnel.

UNICEF is collaborating in this program by providing supplies and equipment.

It is estimated that during 1959-61 the national plan will be in its first stage of application, and provision is made for furnishing the services of one medical officer, one sanitary engineer, one public health nurse, and one sanitarian. An additional nurse will be provided in 1960.

GUATEMALA-11, Tuberculosis Control (See page 156)

This program is based on the results obtained from the mass BCG vaccination campaign carried out between July 1956 and July 1958, with the technical cooperation of the Organization and the participation of UNICEF; it includes a pilot stage that is being conducted in the Department of Escuintla and that, without interruption, will be linked to the extension of activities throughout the country. The techniques used consist of miniature chest X-ray examination of the healthy population over 15 years of age; radiological and bacteriological re-examination of persons showing "abnormal" chest shadows; examination of contacts; treatment with isoniazide of confirmed tuberculosis patients and observation of them for a period of not less than two years, and observation of their contacts for six months, or until the family bacillary focus is eliminated; and the quarterly bacteriological-radiological check of patients under treatment.

Provision is made for one medical officer and for the services of consultants in tuberculosis.

GUATEMALA-12, PAHO Public Health Administration
Fellowships (See page 156)

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

HONDURAS

HONDURAS-1, Malaria Eradication (See page 156)

The malarious area covers 87,383 square kilometers, or 78 per cent of the country's total area, and it is occupied by 1,281,000 inhabitants, or 72 per cent of the total population of Honduras.

The plan of operations for malaria was drawn up in 1955, the tripartite agreement among the Government, UNICEF, and PAHO/WHO being approved in 1956. That agreement was broadened in 1958 to include the drug-distribution plan. The Inter-American Cooperative Public Health Service (SCISP) is in charge of the direction and administration of the SNEM.

The Government's participation is estimated at \$2,500,000 for the entire campaign. UNICEF collaborates by providing supplies and equipment. PAHO/WHO contributes technical advice, antimalarial drugs, fellowships for training, and certain laboratory supplies and equipment.

Total coverage, using dieldrin, was begun in January 1958 and the first year completed in November. The first results of the tests of anopheline susceptibility to insecticides showed the resistance of the *A. albimanus* to dieldrin in certain areas. These findings indicate the need for using DDT in the future.

Provision is made for international personnel and for fulfilling the remaining commitments regarding fellowships and supplies and equipment. In 1959 the personnel consists of one sanitary engineer and one sanitarian. In 1960 one medical officer and one sanitarian will be added.

HONDURAS-4, Public Health Services (See page 158)

As a continuation of the program started in 1954, under which the Government proposed to improve health facilities in rural schools, a plan was prepared late in 1955 to establish a modern health center. In addition to offering services to the public, this plan would serve to train public health personnel to be employed in the future extension of the services throughout the country.

After a survey had been made in the community of Comayagüela, a building was constructed for the health center late in 1957. Training courses were organized that year for nursing auxiliaries and sanitary inspectors, the training center being installed in one wing of the building.

Also in 1957, a plan was drawn up for the organization of the Comayagua Health District and the Public Health Planning Board was organized. Four physicians, 1 sanitary engineer, 4 public health nurses, and 2 sanitary inspectors were given training abroad. In 1958, when trained auxiliary professional personnel were made available, the Las Crucitas (Comayagüela) pilot health center was inaugurated, which provides services to 40,000 inhabitants.

With advice from the WHO consultants, the national personnel carried out a health survey in ten departments

of the Republic, as a basis for drafting a National Public Health Plan, which is expected to be completed in 1959.

The Public Health Planning Board, through committees, is working on the Plan and promoting the gradual reorganization of the central services of the Ministry of Public Health.

In order to implement some of the ideas contained in the National Plan, that is being prepared, the Government increased the Ministry's budget with funds for the construction of health centers and subcenters in six communities in the country; it established the Department of Epidemiology and Statistics; and it approved the organization of Health District No. 1. Training was given to 26 sanitary inspectors and 18 nursing auxiliaries, and a second course was started with 20 nursing auxiliaries and 20 inspectors.

The Organization's team of consultants consists of one medical officer, one sanitary engineer, two public health nurses, and one sanitarian. This same team, with the exception of the sanitarian, will continue in 1961.

HONDURAS-6, PAHO Public Health Administration
Fellowships (See page 158)

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

NICARAGUA

NICARAGUA-1, Malaria Eradication (See page 158)

The malarious area covers 127,199 square kilometers, or 85.9 per cent of the country's total area, and the exposed population is estimated at 1,109,668, or 80 per cent of the nation's total population.

The tripartite plan of operations for the malaria eradication campaign was signed in 1957 by the Government, UNICEF, and PAHO/WHO. In 1958 it was broadened to include the plan for antimalarial drugs.

Participation of the Government of Nicaragua is estimated at \$2,000,000 for the entire campaign. UNICEF provides supplies and equipment. PAHO/WHO furnishes technical advice and continuous technical supervision, as well as drugs and certain types of equipment and material.

Once the preparatory work was completed, the first year of total coverage, using dieldrin, was begun in November 1957. In that year the epidemiological activities were reorganized and tests made of anopheline susceptibility, the vector's resistance to dieldrin being observed in some parts of the country. Second-year operations began in November 1958, with two half-year cycles, using DDT.

In 1958 the direction and administration of the campaign were transferred to SCISP, a measure which led to the complete reorganization of the SNEM.

In 1959 and subsequent periods, coverage operations will be accompanied by stepped-up epidemiological activities and distribution of antimalarial drugs.

Provision is made for furnishing the services of one medical officer, one sanitary engineer, and two sanitarians, and also for supplies and fellowships.

NICARAGUA-5, Nursing Education (See page 160)

Cooperation between the Organization and the National School of Nursing in Nicaragua began in 1955, for the purpose of expanding and improving the basic curriculum, training the teaching staff, and training nurses for key posts in public health services.

The almost total reorganization of the curriculum has been accomplished, the teaching staff reorganized, the premises of the school enlarged and improved, and supplies and equipment obtained. The supervisory and teaching staff and also nurses for public health services were trained by means of fellowships abroad and in-service training in the School. With this notable progress, the School has attained a high educational level recognized by the Ministry of Education.

Provision is made for continuing two nurse-educators, and a third will be added in 1961. Provision is also made for teaching supplies and equipment and for fellowships during the period 1959-1961.

NICARAGUA-7, PAHO Public Health Administration Fellowships (See page 160)

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

PANAMA

PANAMA-1, Public Health Services (See page 160)

Since 1953 the Government of Panama, with the assistance of the Organization and UNICEF, has been conducting a program to develop its public health services, at both the local and the central levels. This program was planned on the basis of a complete evaluation of the country's public health needs and resources. The plan of operation was supported from the start by a broad program for the training of professional, technical, and auxiliary personnel in the various branches of public health through fellowships for study abroad, local courses, and in-service training.

To better cope with the country's present problems, in accordance with the established priorities, a plan was drawn up for the reorganization of the central services and the regionalization of the local services, in order to achieve a sound integration of disease prevention and health promotion services with those of medical care. For this purpose the country was divided into three health regions.

During 1957 the plan was put into operation and activities in the rural areas were intensified, principally in environmental sanitation. In 1958 a health census was completed of all health centers, except the one in Boquete.

The demonstration program started in 1954 in the Chorrera area is being expanded and applied with appropriate variations in other rural areas. In 1958 the Emiliano Ponce Health Center in Panama City was reorganized, and at the same time an improvement of the public health services in the urban areas of Panama, David, and Colón was begun.

As in 1959, the training plan for public health personnel will be continued during 1960-1961, particularly for physicians, nurses, sanitary inspectors, and auxiliary personnel. The reorganization of the regional offices will

be intensified by completing their technical staff, improving existing health centers, and extending their sphere of action to the most remote rural areas. Special attention will be given to improving urban services in Panama City and Colón, as part of the program for the eastern region. The installations of the central public health laboratory will be expanded and the plan for improving regional and rural laboratories will be continued. It is also expected that the tuberculosis control program will be intensified through a gradual expansion of existing services. The environmental sanitation program will be extended to the three regions into which the country has been divided, in accordance with the approved plan.

The international team for 1960 and 1961 will consist of a chief country adviser, one sanitary engineer, and two public health nurses. Provision is made also for supplies and equipment.

PANAMA-2, Malaria Eradication (See page 160)

The malarious area covers 68,497 square kilometers, or 92 per cent of the country's total area, and it is estimated that 950,000 persons, or 96 per cent of the total population, are exposed to the infection.

The malaria eradication plan was approved in 1956, and in 1957 the Government, UNICEF, and PAHO/WHO signed the pertinent agreement, into which amendments regarding drug provision and the maintenance of vehicles were incorporated in 1958.

The Government's participation is estimated at \$2,000,000 for the entire campaign. UNICEF provides supplies and equipment. PAHO/WHO furnishes technical advice, antimalarial drugs, materials and articles for personal protection and for laboratory use, and fellowship funds.

The preparatory stage lasted during all of 1956 and the first half of 1957, after which time total coverage got under way, its first year ending in August 1958.

Provision is made in 1959 for the services of one sanitary engineer (who will also furnish advisory services in the Costa Rica project) and of one sanitarian. In 1960 one medical officer and one sanitarian will be added.

PANAMA-8, PAHO Public Health Administration Fellowships (See page 162)

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

INTERCOUNTRY PROGRAMS

AMRO-7, Aedes aegypti Eradication (Central America and Panama) (See page 162)

Eradication has been completed in Panama, Nicaragua, Guatemala, the Canal Zone, and British Honduras. With the exception of Guatemala, all these countries were declared free from *A. aegypti* by the XV Pan American Sanitary Conference in Puerto Rico. Final confirmation of eradication is under way in Honduras and El Salvador. A final check remains to be made in Costa Rica.

In 1959 provision is made for three sanitarians and one medical officer to make the final check.

AMRO-54, Collaboration with INCAP (See page 162)

The Institute of Nutrition of Central America and Panama (INCAP) is a cooperative enterprise formally inaugurated in 1949. Its objectives are the study of nutrition problems in the area, development of ways in which they might be solved, and assistance for the application of these solutions. The Pan American Sanitary Bureau is a member of the INCAP Council and, at the Council's formal request, is responsible for its administration.

The work at INCAP has as one major objective the gathering of technical information for the promotion of programs related to nutrition in member countries. INCAP's activities often coincide with the interest of research and philanthropic organizations. INCAP, therefore, accepts grants for certain projects where results are of mutual interest. These are carried out through the basic organizational structure and technical personnel of INCAP. Results of all work are then carried to member countries by staff members with intimate knowledge of causes, effects, and possible solutions to nutrition problems.

INCAP's cooperation with member countries in nutrition problems of the area now emphasizes the integration of nutrition programs into general public health services. Public health personnel are being instructed in techniques of prevention of nutritional diseases as well as in the detection of severe nutritional deficiencies and the treatment they require.

As a basis for advice to member governments, studies of dietary habits, nutritional deficiencies, and composition of local foods have been carried out. The first food composition tables for Central America and Panama were completed in 1952. Dietary surveys showed a relative deficiency of good-quality protein, vitamin A, and riboflavin. Nutritional status surveys showed markedly slower growth and maturation and a smaller final stature and weight for Central Americans than for well nourished persons. Anemia was frequently present. Studies on endemic goiter showed average incidence among the countries of 17 per cent to 38 per cent. INCAP demonstrated a practical means of using potassium iodate in reducing the incidence of endemic goiter in school children. Three INCAP countries now have legislation requiring iodization of all salt for human consumption. Since kwashiorkor is a disease in Central America, INCAP has developed a suitable mixture of vegetable proteins for the supplementary and mixed feeding of infants and children. INCAP is further engaged in cooperative studies of varieties of corn of better nutritive value; beans, as the second most important source of protein, have been studied; nutritive values of forages have been studied and a substitute for alfalfa found; and studies of conservation of fowls have been made. A recent field of INCAP's interest is the study of the relation of diet to atherosclerosis in Central America and Panama.

Using the information obtained from research studies and surveys, INCAP has developed basic reference and study materials for nutrition education in Spanish. Practical training in nutrition work is given to professional and auxiliary workers. Publication of results of scientific work in INCAP provides ready reference to new information in both English and Spanish. INCAP's library is the most complete for medical and biochemical work in Central America.

In 1959 through 1961 INCAP will continue making necessary studies in the major problems described above, developing practical programs in these fields, and providing relevant training.

PAHO contributes directly to INCAP by providing two medical officers, consultants, and assistance in financing meetings of both the Directing Council and the Technical Advisory Committee.

AMRO-86, Health Statistics (Zone III) (See page 164)

The functions of the statistical consultant proposed for the countries of Zone III are: (a) to give advice 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 render assistance 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 phases of projects and assist in the compilation and analysis of information in the countries for purposes of program planning.

During almost all the year 1958 the services of the consultant were dedicated primarily to the services of health statistics in Panama. During 1959-1961 he will extend his activities to other countries.

Provision is made for a statistician and his travel expenses.

AMRO-118, Malaria Technical Advisory Services (Zone III)
(See page 164)

The purpose of this project is to provide technical advice in malaria eradication activities and also to the international staff assigned to the countries of Zone III.

Provision is made for a team of consultants for the task, composed of one chief zone malaria adviser, one sanitary engineer, one administrative methods officer, one entomologist, four entomology aides, and one secretary.

Provision is also made for office supplies and equipment.

AMRO-121, Malaria Eradication Evaluation Teams
(See page 164)

Eradication requires perfection in eliminating all possible foci of a disease. The strict requirements that must be met to fulfill the definition of malaria eradication, as internationally accepted at present, make it essential that evaluation procedures be widespread and thorough at all stages of the campaigns. The early discovery and quick elimination of foci is a *sine qua non*, since their existence represents a threat to the country and to its neighbors.

Under this project, the Organization is, in agreement with governments, examining in detail the evaluation procedures being utilized in countries in order to determine whether such foci are or can be discovered promptly. Such examinations provide the basis for strengthening existing evaluation departments, and, eventually, lead to

certification procedures for the declaration of malaria-free areas.

One team began its activities in 1958, working initially in the Windward Islands. As a result of the team's activities, foci of infection were found on two of the islands. The team also studied the evaluation procedures in Panama, Guatemala, and British Honduras in 1958, making pertinent recommendations for the improvement of national evaluation services.

Provision is made for a second team to be added in 1960. Each team is composed of a chief, a parasitologist, and one sanitarian.

AMRO-141, Health Education (Zone III) (See page 164)

Consultant services in the field of health education have been made available to the Central American countries and Panama through the former interzone project AMRO-93. In view of the growing need for this type of international assistance in these countries, beginning in 1959 it is proposed to provide a full-time health educator to serve Zone III. In collaboration with other international personnel, this adviser will give assistance to the national health departments in determining and meeting their health education needs; he will serve also as consultant to the Organization's staff and to personnel of the national health agencies in planning and carrying out the educational aspects of their work.

Provision is made for the services of the health educator.

AMRO-148, Laboratory for Production of Biologicals (Zone III) (See page 166)

Shortage of trained personnel and budgetary limitations have prevented the establishment of laboratories where biologicals could be produced in the quantities required to meet the needs of each of the countries in Zone III. A study is therefore required that will cover data on laboratories in operation and on personnel and installations available; type, quantity, and quality of products manufactured; needs of the countries as regards immunizing products; and type and quantity of each product needed, in relation to the size of the problem represented by each disease. It is expected that on completion of the study one or more of the production laboratories at present in operation in the Zone will be selected for conversion into a center for manufacturing biologicals for Central America and Panama. It is expected that this regional laboratory will function with funds and personnel furnished by the participating countries.

In 1959 a medical officer will conduct the study in each country in the Zone. Provision is made also for continuing the services of a medical officer in 1960 and 1961 in order to furnish the necessary technical advice for the organization and operation of the regional laboratory.

For the installation of the regional laboratory, it is expected that equipment already available in the laboratory selected will be supplemented with material acquired with funds from other sources. However, provision is made in 1960 and 1961 for a limited amount of special supplies and equipment that will be needed in addition to that provided from other sources. Provision will also be made for fellowships.

AMRO-188, Veterinary Public Health (Zone III) (See page 166)

The functions of the veterinary public health advisor for the countries of the Zone are: to provide technical consultation in that field of preventive medicine concerned with food hygiene and the prevention and control of the zoonoses; to advise on the planning, implementation and evaluation of veterinary public health activities integrated into the general public health program; to assist in the selection and training of public health veterinarians, including the organization of courses and seminars; and to assist educational institutions for the training of public health veterinarians and other public health personnel.

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

AMRO-202, Leprosy Control (Zone III) (See page 166)

As part of the activities of project AMRO-149, leprosy surveys were conducted in Guatemala and Costa Rica in 1958. It is expected that surveys in the remaining countries of the Zone will be completed in 1959.

Surveys conducted to date reveal that, although the leprosy problem in Central America and Panama is not as great as in other countries, there are active foci of the disease, and that these can be readily controlled provided the present techniques are brought up-to-date and the activities of the public health services in the sector are expanded. The fact that the problem is limited points to the need for implementing an adequate program aimed at the effective control of existing foci and the prevention of their spread to other areas.

Through this project, it is planned to provide the services of a medical officer to all countries of the zone, beginning in 1960. Provision is also made for fellowships for training personnel from the various countries, preferably in one where the necessary facilities are established or can be organized.

AMRO-203, Epidemiology (Zone III) (See page 166)

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 new methods and techniques of control; (c) to coordinate the programs of eradication and 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 in 1961.

AMRO-206, Environmental Sanitation Training (Zone III) (See page 166)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is now being divided into zone projects. The fellowships will be awarded for training largely in the schools of Public Health in Brazil, Chile, and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1960 and 1961.

PART III

ZONE IV

Zone Office (See page 168)

For text see "Zone Offices," page 16.

BOLIVIABOLIVIA-4, Malaria Eradication (See page 168)

The malarious area of Bolivia covers approximately 77 per cent of the country's total area, and the population at risk is estimated at 1,200,000. The total number of houses to be covered is estimated at 181,171.

The basic plan was prepared in 1957. The first total-coverage operation began on 1 September 1958, and by the end of the year approximately 67,000 houses had been sprayed. Simultaneously the organization of the epidemiological-evaluation operations was undertaken. Spraying operations will continue until mid-1961.

UNICEF contributes insecticides and equipment. ICA also is lending considerable support to the program; through a separate agreement with the Government, this agency stipulated that it would contribute to the payment of local costs, estimated at \$2,000,000.

Provision is made for one medical officer, one sanitary engineer, and four sanitarians in 1959, 1960, and 1961. Provision is also made for fellowships for the training of national personnel, for protective equipment and antimalarial drugs, and for transportation means for international personnel.

BOLIVIA-5, Nursing Education (See page 170)

Since 1953 the Organization has provided advisory services to improve and develop nursing education through the National School of Nursing, in whose curriculum social and public health aspects have been incorporated. An attempt is being made to coordinate the efforts of all the national institutions that benefit from the School by utilizing its graduates, and it is hoped that each institution will make an economic contribution to the support of the School.

In spite of financial difficulties, there has been a steady improvement in the instruction, and during 1958 the program was expanded with classes in urology, ophthalmology, neurology, and anthropology, and there has also been an improvement in relating theory to practice. Interest in admission to the School has increased notably, and it is required, as a minimum, that applicants have completed their secondary studies.

The National School of Nursing has assisted the other schools in the country in standardizing entrance requirements, curriculum, and practice fields, thus helping to improve teaching throughout the country.

Provision is made for continuing the services of one nurse-educator and also for a limited number of fellowships.

BOLIVIA-10, Public Health Services (See page 170)

This project, which was started in 1955 for the purpose of organizing a Central Office of Planning and Coordination within the Ministry of Public Health, was reduced in 1957 to a single consultant whose functions are to coordinate the programs carried out with the advice of the Organization and, particularly, to advise the Minister and other public health authorities on the progress of the health services at both the central and the local levels.

This reduction is advisable because of the present economic conditions in the country, which make it difficult to expedite the development of the health services and to provide adequate training for the personnel. As a result, the progress being made is slow, although sure.

In 1958 the Bolivian Sanitary Code was promulgated and arrangements have been made to establish, in 1959, the Departments of Environmental Sanitation, Public Health Nursing, and Veterinary Public Health. Also, the necessary provisions and allotments have been included in the budget to establish a career health service, giving stability of employment to the technical and administrative personnel. It is expected that this program will continue until 1965 and that it will expand in the next few years.

Provision is made for a chief country adviser to continue furnishing advisory services, and for fellowships to train national personnel in public health administration.

BOLIVIA-11, Joint Field Mission on Indigenous Populations (See page 170)

Approximately 20 per cent of the people of Bolivia are inhabitants of the Andean Region, where they are concentrated in the unproductive, difficult highlands. There are few health and medical services available. Typhus is endemic in the area, infant and maternal mortality rates are unduly high, and standards of environmental sanitation are precarious.

This project has been designed to accelerate the natural development of the peoples of this area and to integrate them socially and economically in the national life. Several agencies (ILO, FAO, UNESCO, and the Organization) have undertaken to cooperate with the Government to stimulate this development. Since February 1955 the Organization has provided a medical officer to advise on the public health aspects of the program.

During the period 1954-58 three health centers were established in areas of high altitude; Pillapi (Department of La Paz), Playa Verde (Department of Oruro), and Otavi (Department of Potosi).

As part of another phase a health center has been established at Cotoca (Department of Santa Cruz de la Sierra) for the resettlement of populations from high altitude areas which are agriculturally unproductive and overpopulated to lower-altitude areas which are fertile and sparsely populated.

It is proposed to continue the plan of work of the health centers at Pillapi, Playa Verde, Otavi, and Cotoca; to extend the services of the first center to four

neighboring communities; to expand the services of the Cotoca center to include the additional immigrant groups that are being incorporated into the new settlement; and to continue promoting the training of professional and auxiliary personnel.

Provision is made for a medical officer, who will also give advisory services to the Peru-23 project.

BOLIVIA-12, Leprosy Control (See page 170)

The extent of the leprosy problem in Bolivia is not well known, but according to available data it is considered to be an important problem in the central valley and in the tropical region of the country. In order to collect up-to-date basic data on this disease and to prepare a control program, a thorough epidemiological survey will be carried out in the country during 1960.

Provision is made in 1960 for a short-term consultant, who will collaborate in making the survey and in drawing up a plan for leprosy control.

BOLIVIA-13, WHO/TA Public Health Administration Fellowships (See page 170)

Provision is made for fellowships to train staff for the improvement and expansion of its health services.

COLOMBIA

COLOMBIA-4, Public Health Services (See page 172)

The objective of this project is the development of a pilot project of integrated public health services in five of the country's departments, in which specially-selected centers will give particular attention to the following basic activities: maternal and child health, communicable disease control, and environmental sanitation.

The plan is directed toward the training of all professional and auxiliary personnel at the level of both the departments and the centers. UNICEF participation in the project consists of the provision of equipment for the centers, including one vehicle for transportation at each center, and financial assistance for the auxiliary personnel while they are in training.

In 1957 and 1958 public health orientation courses were given to 44 physicians, 30 nurses, 35 nursing auxiliaries, and 58 sanitary inspectors. Some of this personnel, particularly those trained in 1957, are already providing services at the pilot centers in the Departments of Norte de Santander and Boyaca. In 1959 the personnel trained during the previous year will begin to work in the Departments of Narino and Cundinamarca.

In connection with this project, reference should also be made to project Colombia-24, covering collaboration in the improvement of the School of Public Health.

The Organization will continue to provide the advisory services of the team of consultants composed of two medical officers, one sanitary engineer, and three public health nurses for 1960 and 1961. Provision is made also for supplies and equipment.

COLOMBIA-5, Malaria Eradication (See page 172)

The malarious area of Colombia covers 90 per cent of the country's total area, and approximately 75 per cent of the total population is at risk. According to the geographic reconnaissance, there are 1,200,000 houses to be sprayed.

On 29 September 1958, spraying operations began, and they will continue until the end of 1961. Late in 1958 the epidemiological-evaluation operations were also started. During the first month of spraying, almost 250,000 houses were covered.

UNICEF collaborates in this program by providing equipment and insecticides. The tripartite agreement was signed in 1958. ICA has contributed more than \$500,000. As for the Government, it will contribute more than \$19,000,000 for this campaign.

Provision is made in 1960 and 1961 for the following group of advisers: one chief malaria adviser, one medical officer, one sanitary engineer, one statistician, and six sanitarians. Provision is also made for certain supplies and equipment, especially drugs, and for fellowships intended to train such new personnel as may be needed.

COLOMBIA-17, Smallpox Eradication (See page 172)

The Government of Colombia has been conducting a smallpox eradication campaign since 1955, with the technical advice of the Organization. It is expected that at least 80 per cent of the country's population will be vaccinated in a period of five years.

The equipment for a dry smallpox vaccine production unit was furnished by UNICEF. The Organization has provided the services of a consultant to advise the national authorities in the planning and execution of this campaign; the services of an expert in dry vaccine production; a fellowship for the medical officer in charge of the vaccination campaign, to enable him to observe the development of a similar campaign in a neighboring country; and certain supplies and equipment.

From the start of the program until March 1959, a total of 5,645,851 persons have been vaccinated. The program, which had developed slowly in the first two years, was intensified in 1958, when it proceeded at a very satisfactory pace.

With the larger appropriation made by the Government for 1959, it is expected that the campaign will progress at an accelerated pace in that and subsequent years in order to attain the goal set.

Provision is made for one medical officer in 1960 and 1961.

COLOMBIA-18 (WHO), COLOMBIA-21 (PAHO), Public Health Administration Fellowships (See page 172)

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

COLOMBIA-19, Leprosy Control (See page 174)

Leprosy is a problem of special importance in Colombia, since it is estimated that there are some 15,000

leprosy patients, which means a prevalence of 1.1 per 1,000 inhabitants. The true extent of the problem, however, is not known.

In 1958 the Organization provided the services of a consultant, who has made a complete study of the existing program and also prepared suggestions for the reorganization of the Leprosy Service.

It is expected that in 1960 and 1961 all the units of the Leprosy Service will be appropriately reorganized, and this will make possible a control program based on modern techniques and procedures.

Provision is made for continuing in 1960 and 1961 the services of a medical officer.

COLOMBIA-22, *Aedes aegypti* Eradication (See page 174)

Yellow fever is endemic in the jungle areas of Colombia and periodically epidemic in many cultivated regions. *A. aegypti* is widely prevalent in many parts of the country. There is therefore constant risk of outbreaks of the urban type of the disease.

Aegypti eradication operations were started in 1952 in the Caribbean area, and the results obtained up to now are very satisfactory. It is expected that, *A. aegypti* will have been eradicated from the country by 1960.

Provision is made for one medical officer in 1959.

COLOMBIA-24, School of Public Health (See page 174)

The National University of Colombia is completing a plan of reorganization and improvement of the standards of the School of Public Health which has been in existence a number of years. Part of the plan is to have a nucleus of full-time faculty members to develop programs of education and research. For some years the Organization has worked with one course for public health nursing under project Colombia-4. The latest course in public health nursing began in May of 1959. A new and expanded course for physicians and other professional personnel is to begin in August.

Collaboration of the ICA includes several visiting professors and the Organization proposes to provide a visiting professor in microbiology as well as short-term consultants in various aspects of the teaching program.

COLOMBIA-52, Yellow Fever, Carlos Finlay Institute (See page 174)

The long experience of Colombia with yellow fever and its resources for producing vaccine led to an agreement with the Organization in 1950 for the Carlos Finlay Institute to become a vaccine supply center in the Americas.

During 1958 the Institute has distributed over a million doses of vaccine to other countries in the Hemisphere and has utilized 120,000 doses in Colombia.

Provision is made for the annual grant to continue through 1961 in accordance with the cooperative agreement.

ECUADOR

ECUADOR-4, Public Health Services (See page 174)

In the first phase of this project, initiated in 1953 with the collaboration of the Organization and of UNICEF, a Maternal and Child Health Division within the National Department of Health and eleven rural centers were organized. Training courses were held also for professional and auxiliary personnel.

In 1956 the scope of the project was enlarged with a view to reorganizing the national health services progressively and establishing new basic departments in the National Department of Health. Also, plans were made to improve the local health services progressively. For this purpose the Organization provided the advisory services of one medical officer and one public health nurse at the level of the National Department of Health. During 1958 five new health centers were established in the interior of the country and technical assistance was given to those already in operation. The Division of Environmental Sanitation was established also in that year.

It is expected that within the next few years it will be possible to establish a Division of Communicable Diseases and a Division of Public Health Nursing. It is also expected that legislative measures will be adopted for the establishment of a career service system so as to provide stability of employment and adequate salaries for the full-time staff. Also, an endeavor will be made to strengthen and expand the network of health centers and to continue the training of professional and auxiliary personnel.

Provision is made for one medical officer and one public health nurse, and for long-term fellowships to train national professionals in public health administration.

ECUADOR-11, National Institute of Health (See page 176)

During the period 1952-56 the Organization provided advisory services, through various consultants, to the Leopoldo Izquieta Perez National Institute of Health, whose services were expanded and improved, particularly in the production of vaccine and biologicals.

At the end of 1957 studies were undertaken for the complete reorganization of the Institute with full-time personnel, but it has not yet been possible to implement this plan. Studies on the methods of achieving this objective will continue, and in the interval the services of a consultant in bacteriology and administration of public health laboratories will be provided to the Institute.

Provision is made for one consultant and for fellowships.

ECUADOR-14, Malaria Eradication (See page 176)

Ecuador's malarious area covers approximately 75 per cent of its total area, and the population at risk is estimated at 1,500,000.

The first total-coverage operations, in which 300,318 houses were sprayed with a total of 320,981 sprayings, began in April 1957. Of those houses, 19 per cent were treated with DDT and the rest with dieldrin.

The second coverage was started in March 1958, and by 30 November 261,879 houses had been sprayed.

During 1958 efforts were intensified to establish a network for the notification of cases in all the areas of operation, and by 30 November there were 1,362 posts of volunteer collaborators.

Routine study of anopheline susceptibility has also been started, especially of the *A. albimanus*.

UNICEF contributes insecticides, means of transportation, and laboratory and spraying equipment. ICA also has furnished supplies and equipment. The Government's participation is estimated at US\$1,700,000.

Provision is made in 1960 and 1961 for the following personnel: one chief malaria adviser, one sanitary engineer, and four sanitarians. Provision is also made for a limited amount of supplies and equipment, especially protective equipment and antimalarial drugs, and for some fellowships, so that such new professionals as may be incorporated into the project may be trained during 1959 and 1960.

ECUADOR-16, Nursing Education (See page 176)

Up to 1956 only 302 nurses had been graduated in Ecuador, of whom 195 were working in hospitals and in health services. In addition to the modern school established in Quito, there are plans to raise the standards of the School of Nursing attached to the School of Medicine of the University of Guayaquil. This program was begun in 1957 with a general reorganization of the School and the selection and appointment of teaching staff.

The academic year has been increased to ten months and the curriculum and the program of practical experience have been expanded.

Owing to the lack of a residence, the School continues to function with day students only. This makes it difficult to attract a larger number of students, especially from outside the city of Guayaquil.

Provision is made in 1960 and 1961, as in 1959, for two nurse educators. There is also provision for a limited amount of supplies and for fellowships in 1960.

ECUADOR-18, Leprosy Control (See page 178)

Available data on the extent and prevalence of leprosy in Ecuador are incomplete. It is known, however, that the disease is limited to the southern part of the country, although there seem to be some isolated foci in other areas.

With the assistance of a specialized consultant, a survey will be conducted in order to obtain the complete basic information needed to prepare a plan for the prevention and control of this disease.

Provision is made in 1960 for the services of a short-term consultant to advise on the leprosy survey.

ECUADOR-19, PAHO Public Health Administration Fellowships (See page 178)

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

ECUADOR-20, Smallpox Eradication (See page 178)

In order to assist the Government of Ecuador in eradicating smallpox from the country, the Organization furnished in 1951 the necessary equipment to install a dry smallpox vaccine production unit and the services of an expert in methods of producing this type of vaccine. Supplies for the vaccination campaign were also provided.

The vaccination campaign has progressed slowly because of the lack of financial resources and adequately trained personnel. Late in 1957 the Government concluded an agreement with the Organization for initiating a mass vaccination campaign to immunize at least 80 per cent of the population within five years. In 1957 the Organization furnished eight vehicles and some supplies for the vaccination campaign.

During 1958 it was not possible to obtain a permanent adviser experienced in this kind of campaign, and the services of a consultant could be furnished for three months only.

The lack of a permanent adviser limited the campaign to the Province of Pichincha, especially the city of Quito. In 1958, a total of 321,875 persons were vaccinated and the Institute of Health produced 1,342,050 doses of dry vaccine and 30,010 doses of glycerinated lymph.

With the appointment of the above-mentioned adviser, made early in 1959, it will be possible to intensify the campaign and extend it to the entire country.

Provision is made in 1960 and 1961 for one medical officer and for fellowships for training professional personnel.

ECUADOR-53, National Institute of Nutrition (See page 178)

The Organization has cooperated with the National Institute of Nutrition of Ecuador since 1950 through the provision of advisory services. The Kellogg Foundation cooperated at the beginning of the project by providing a certain amount of equipment.

In the first phase of the project, between 1950 and 1955, the Institute organized the bromatological laboratory and made numerous dietary surveys.

In the second phase, begun in 1956, the clinical nutrition activities were organized, although the clinical laboratory is not functioning fully because the equipment did not arrive until the end of 1958.

In 1958 a nutrition section was organized in Guayaquil and the general survey on the state of health and nutrition of school children was continued. A study on the incidence of endemic goiter in the country was also begun. During that year, three dietary surveys were made in different parts of the country, and a nutrition rehabilitation center was opened in the Baca Ortiz Hospital in Quito.

At the end of 1958, a plan was prepared for expanding the goiter studies and drafting a program for the prevention of the disease, and also for organizing a broad program of nutrition education and information.

Provision is made for continuing the services of one medical nutritionist and for a limited amount of supplies and equipment for 1960 and 1961.

PERUPERU-5, Malaria Eradication (See page 178)

The malarious area of Peru covers 12 per cent of the country's total area, and the number of inhabitants at risk is estimated at 4,736,839, or 41 per cent of the total population.

A broad plan was prepared in 1956 and approved in 1957; it divided the country into two zones, a western and an eastern zone, separated by the Andean mountains.

The first total-coverage spraying began in the western zone in November 1957 and was completed in 1958, with a total of 405,771 houses sprayed and 440,918 sprayings.

In August 1958, spraying operations began in the eastern zone, with somewhat more than 100,000 houses being sprayed; however those operations had to be interrupted, owing to the rainy season and to the need for beginning the second spraying cycle in the western zone at the proper time. On 17 November 1958 the second total coverage of the western zone got under way.

In 1958, epidemiological-evaluation operations were started, 2,459 volunteer notification posts being established during that year.

UNICEF furnishes insecticides, means of transportation, and spraying and evaluation equipment, and the Government will contribute US\$5,700,000 to the program.

Provision is made in 1960 and 1961 for the following personnel: one chief malaria adviser, one sanitary engineer, and six sanitarians. Provision is also made for supplies and equipment, especially protective equipment and antimalarial drugs, and for some fellowships for training new personnel assigned to the campaign.

PERU-15, Nursing Education (See page 180)

The increase in hospital and public health services in Peru has shown the need for having available nurses who have thorough training in administration and supervision as well as in teaching and public health, and for establishing new nursing schools. Such schools would make it possible to increase the number of professional graduated each year, especially outside the capital, since all the existing schools at present are in Lima.

The objectives of this program, therefore, are (1) to organize advanced courses for the training of nurse-supervisors, for both hospitals, schools, and public health services; and (2) to establish new schools of nursing in the interior of the country.

To accomplish the first objective, the National Postgraduate Institute of Nursing has been established; it began to operate at the end of 1958, with a short course for nurse supervisors. It is expected that a longer course for supervisors and administrators will be established in 1959, with advice from the Organization.

To accomplish the second objective, negotiations are under way with the University of Arequipa and the hospital health center in Tarma, to study the possibility of establishing schools of nursing in each of these cities.

Provision is made in 1960 and 1961, as in 1959, for one nurse educator and for long-term fellowships to train Peruvian professionals abroad. Provision is also made for a limited amount of teaching and demonstration material in 1960.

PERU-22, Public Health Services (See page 180)

The purpose of this program is to provide a team of public health experts to cooperate, as consultants, in the planning, evaluation, and coordination of public health activities on both the central and the local levels.

In 1958 the Department of Nursing was strengthened and aid was given in establishing the Postgraduate Institute of Nursing. Collaboration was also given in improving the organization of health areas and in studying the basic information on environmental sanitation and, especially, on the development of water supply systems in the urban areas of the country.

It is expected that during 1959 and subsequent years it will be possible to organize most of the country in health areas.

It is also planned to collaborate in the plans for extending welfare and preventive services, as well as in the campaigns against certain types of communicable diseases, such as leprosy and tuberculosis, for which plans are already well advanced.

Provision is made for continuing the services of a chief country adviser, a sanitary engineer, and a public health nurse.

PERU-23, Joint Field Mission on Indigenous Populations
(See page 180)

The purpose of this project is to accelerate the natural development of the indigenous peoples of the Andean Region of Peru and to integrate them socially and economically in the national life.

Several international agencies (ILO, FAO, UNESCO, UN/TAA, and the PAHO) participate in this program.

From 1955 to 1957 the Organization provided the services of a medical officer to advise on the public health aspects of the project, which also includes agriculture and stockraising, education, labor, and rural welfare. This medical officer has also advised the same project for the Andean Region of Bolivia (Bolivia-11).

The centers that have been organized in connection with this project in various indigenous communities of the Department of Puno (Camicachi, Chucuito, Taraco, and Vilquechico) provide elementary services, and the national personnel consists of a medical officer, a nurse, and a midwife who provide service every day in one of these centers.

Provision is made in 1960 and 1961 for the consultant in Bolivia to travel periodically to the region in Peru where this program is being carried out.

PERU-25, PAHO Public Health Administration Fellowships
(See page 180)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement

and expansion of its health services.

INTERCOUNTRY PROGRAMS

PERU-26, Public Health Orientation Course (See page 180)

The objectives of this project are to give orientation in various aspect of public health practice to staff members of the Ministry of Public Health of Peru. It is intended also to promote interest in public health teaching activities.

For this purpose, it is proposed to organize an intensive course for professional personnel now serving both the central and the local levels. This course to be held in 1959 and repeated in 1960, will last for approximately four months.

The Organization will furnish each year the services of two consultants, each for a period of two months, one of them a specialist in public health administration and the other an expert in epidemiology and statistics.

Provision is made also for supplies and certain teaching materials.

PERU-28, Veterinary Medicine Education (See page 180)

The National University of San Marcos is organizing and developing the services relating to public health in its Faculty of Veterinary Medicine. Provision is made in 1959 for short-term consultants to assist in developing a well-coordinated and harmonious curriculum and services in the faculty with special emphasis on preventive medicine and public health.

PERU-29, Tuberculosis Control (See page 182)

A long-range plan for the control of tuberculosis in Peru is proposed which will have the cooperation of UNICEF and the Organization.

There is no exact knowledge of the extent of tuberculosis in Peru at the present time. A survey of the prevalence of this disease is planned under project AMRO-110 for 1960. Provision is made in 1961 for fellowships for training for work in the field of tuberculosis.

PERU-54, Typhus Vaccine (See page 182)

As a continuation of the typhus control program in the highland regions, developed with the advice of the Organization and the material cooperation of UNICEF, epidemiological and laboratory studies on the efficacy of Strain E of *Rickettsia prowazekii* vaccine were undertaken with the cooperation of the Department of Epidemiology, School of Medicine, Tulane University.

These epidemiological field tests were completed in 1957, and the preliminary results of the final evaluation, which will be made by the Tulane School of Medicine, seem to be favorable.

Provision is made in 1960 for the services of a consultant in vaccine production.

AMRO-119, Malaria Technical Advisory Services (Zone IV) (See page 182)

The purpose of this project is to provide technical advice in malaria activities and also to the international staff assigned to the countries of Zone IV.

Provision is made for a team of consultants composed of one chief zone malaria adviser, one sanitary engineer, two administrative methods officers, two entomologists, and one secretary.

AMRO-143, Health Statistics (Zone IV) (See page 182)

The functions of the statistical consultant proposed for the countries of Zone IV are: (a) to give advice 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 render assistance in the selection and follow-up of fellowship students and in the development of seminars, work-shops, 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 countries for purposes of program planning. Services were initiated in this field in 1956.

Provision is made for the continuing services of a health statistician.

AMRO-179, Veterinary Public Health (Zone IV) (See page 182)

The functions of the veterinary public health adviser for the countries of the Zone are: to provide technical consultation in that field of preventive medicine concerned with food hygiene and the prevention and control of the zoonoses; to advise on the planning, implementation and evaluation of veterinary public health activities integrated into the general public health program; to assist in the selection and training of public health veterinarians, including the organization of courses and seminars; and to assist educational institutions for the training of public health veterinarians and other public health personnel.

Provision is made for a public health veterinarian.

AMRO-207, Environmental Sanitation Training (Zone IV) (See page 182)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is now being divided into zone projects. The fellowships will be awarded for training largely in the schools of Public Health in Brazil, Chile, and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1960 and 1961.

PART III

ZONE V

Zone Office (See page 184)

For text see "Zone Offices," page 16.

BRAZILBRAZIL-3, Public Health Services (Northeast) (See page 184)

For the past seven years the Organization and UNICEF have been collaborating with the Government in the development of a maternal and child health program in seven states of the northeast and two central northern states of Brazil. International assistance has been principally equipment and supplies furnished by UNICEF and technical orientation and planning by the regular staff of the Organization. It became apparent that the scope of the project needed to be enlarged to include rural sanitation, communicable disease control and health education and, since 1955, there have been discussions on converting the project into an integrated health service. After several attempts to organize such a project on a large scale, it was finally agreed in 1957 that this type of program would be started in one state in the northeast, Rio Grande do Norte, and a plan of operations was accordingly drawn up to include besides maternal and child health, rural sanitation, communicable disease control and health education. This project is being used as a demonstration and training area for various types of personnel for this and similar health services.

In 1959 similar activities are being developed in the States of Sergipe and Piaui. The work in these states will be coordinated at the ministerial level by SESP using a multi-agency council, in which the State Health authority, the National Department of the Child, the National Department of Endemic Diseases, the National Health Department, the Organization and UNICEF are represented.

UNICEF is giving assistance to the integrated health services in all three states.

Provision is made in 1960 and 1961 for one medical officer to assist with the development of services in the three states. Fellowships are also being provided.

BRAZIL-8, National Virus Laboratory Services (See page 186)

The Oswaldo Cruz Institute, one of the national public health laboratories of Brazil, is responsible for diagnostic services, production of biologics, and research. In addition, it serves as a training center for certain laboratory personnel of other laboratories in Brazil.

This project is designed to assist the Institute to expand and improve its virus laboratory activities. Through the provision of the services of a virologist, some supplies, and equipment, it is planned to give assistance in the establishment of a virus diagnostic laboratory, virus investigation and research activities, and the production of needed virus vaccines.

BRAZIL-18, National Food and Drug Service (See page 186)

In 1957 a National Drug Control Laboratory was established to permit the control of drugs imported into or

manufactured in the country. During that year the Organization gave technical assistance with respect to equipment, personnel training and general organization of the laboratory. In 1958 additional consultative collaboration was given by the Organization in the preparation of a combined Food and Drug Act.

It is now proposed to develop a Federal Food and Drug Control Service for the entire country. The Drug Control Laboratory is large enough and will be adapted to handle food examination as well as drugs. Special inspection services for food and drugs will be created. The National Service is expected to provide both technical and advisory services to individual state programs. The collaboration of the Organization will continue through 1960 in the provision of long-term fellowships and in additional technical consultations.

Provision is made for consultants and fellowships.

BRAZIL-19, School of Public Health (Rio de Janeiro) (See page 186)

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 now has national and international status. This school cannot, however, meet all the national training needs for a country as large as Brazil.

The National Department of Health and the National Department of the Child each has been operating courses in public health geared to their particular field of interest but it is proposed to combine these two courses as well as other minor related courses into a national school for professional education in public health, allowing the possibility for some specialization. Premises for the combined courses have been provided and teaching of core subjects is planned to start July 1959.

The Organization has provided a consultant to assist in the planning of the curriculum, organization and administration of the new school and a number of books to enlarge and bring up-to-date the combined libraries of the existing courses to form an adequate library for the National School.

Provision is made for a professor of public health in 1959. Short-term consultants and fellowships are provided through 1961.

BRAZIL-24, Malaria Eradication (See page 186)

The malaria eradication program of Brazil is the largest in the Americas. Sixty-two per cent of the municipalities of Brazil with an area of 7,300,000 Km² (85% of the total area of the country) are in the malarious area. About 30,000,000 people live in this area. Intensive control work has reduced the incidence of malaria to a large extent and in some areas has practically interrupted its transmission. In spite of this, a considerable number of cases still occur which causes great economic losses to the country.

This campaign is being conducted by a Working Group, chaired by the Minister of Health. An Executive Director is in charge of its development. The program will be assisted

by ICA through substantial quantities of equipment and materials and by PAHO.

Due to the size of the country, the difficulties of work, and the large resources necessary, the program will be initiated by zones. In 1958 all the preliminary work for the conversion of the program from control to eradication was done and an intensive personnel training program within the country and abroad developed. Geographical reconnaissance was started in the first areas. In 1961 all zones will be under total coverage with spraying operations, with the exception of the Amazon area where the program starting in 1959 will be carried on by the use of chloroquinized salt.

It is anticipated that spraying operations will be completed by 1964 and surveillance by the Malaria Eradication Service in the whole country discontinued and passed over to general public health service in 1967.

Funds are provided for the services of a sanitary engineer and for drugs and laboratory equipment. Fellowships will be provided for the training of professional personnel.

BRAZIL-28, PAHO Public Health Administration Fellowships
(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.

BRAZIL-31, Rehabilitation Training Center (See page 188)

Following a study made in 1953 by consultants of the Organization and the United Nations, a rehabilitation training center has been established in the Clinical Hospital of the University of Sao Paulo. When fully staffed and developed, this center will serve not only for the training of national personnel but also as an international training center for other Latin American countries.

The building and equipment as well as the necessary funds for the operation and maintenance of this center have been provided.

UN/TAA has provided consultants (an administrator and a social worker) to initiate the activities of the center. In order to complete the team of international personnel, the Organization and the ILO have provided specialists to help in the organization and operation of the training activities in the first years, beginning with an ILO consultant in vocational training and a consultant of the Organization in physical medicine.

Provision is made for a medical officer.

BRAZIL-33, Training for Laboratory Technicians
(See page 188)

Federal and State Laboratories throughout Brazil are in general well equipped and well staffed at the top level, but are greatly lacking in well-trained laboratory technicians. This shortage inevitably affects the quality and quantity of the work that can be performed.

A general course for training selected national and state laboratory personnel which would last approximately ten months could prepare 20 students in each course.

Provision is made for an adviser on organization and

content of this course, and for supplies and equipment in 1960 and 1961.

BRAZIL-34, Seminar on Diarrheal Diseases (See page 188)

Diarrheal diseases represent one of the most important and serious health problems in Brazil. Coordination of action by the federal, state, and local agencies in combating these diseases is highly desirable.

For this purpose the Organization is collaborating in planning and conducting a national seminar on diarrheal diseases, using the same multidisciplinary approach that proved so successful at the seminar (AMRO-94) held in Santiago, Chile, in 1956. Participants from the various states and territories will attend.

Provision is made for short-term consultants, contractual services and for participants.

BRAZIL-35, School of Public Health (Sao Paulo)
(See page 188)

The School of Hygiene and Public Health of Sao Paulo has, for a number of years, not only served as a training center for Brazilians but also, in an ever increasing degree, as an international training center. Programs have gone beyond the standard courses for physicians and engineers. In addition to the courses in dental and veterinary public health, which were developed during the past two years, a course in public health nursing will be added in 1959. A closer relationship between formal and field training is now possible due to the transfer of the Araraquara Training Center to the University, which took place in 1958.

Provision is made for continuing the assistance of the Organization by providing short-term consultants, certain supplies and equipment and travel grants for faculty members.

BRAZIL-37, Dental Health Education (See page 188)

There is a growing need for adequately-trained public health dentists to operate the developing or expanding dental public health services in the Americas, a need which can be met for the present by an international training center. This project aims to assist the School of Hygiene and Public Health of the University of Sao Paulo in the development of such a center.

The Organization and the Kellogg Foundation are cooperating with the University of Sao Paulo in setting up the Center. During 1958, the first specialized course in public health dentistry had students from 8 Latin American countries attending (See AMRO-72). Graduates will be filling key positions in health services or teaching hygiene and public health in dental schools. From 1960 on, a short course will also be offered, especially designed for orientation in public health, for dental clinicians working at local levels. The Center will also assist the School of Hygiene in presenting dental public health subjects to students of the several health disciplines.

It is expected that the center will contribute to the development of dental public health in the Region not only by preparing specialists for the health services, but also by preparing teaching material, disseminating information and conducting field research projects in parallel with the teaching program.

When the project started in 1958 assistance was given by regular staff of the Organization. A short-term fellowship for a member of the School faculty was also provided.

Provision is made in 1959 for a limited amount of teaching equipment and supplies. Advisory services will continue to be given by a regular staff member of the Organization.

BRAZIL-38, Smallpox Eradication (See page 190)

Smallpox is endemic in rural areas and is introduced into urban populations by persons coming from these foci.

Because of its large population and vast area, where, in many places refrigeration and transportation facilities are lacking, Brazil needs a large supply of dry-smallpox vaccine in order to carry a nation-wide campaign for the eradication of this disease.

Under this project some equipment has already been provided for two strategically located vaccine-producing laboratories serving widely-separated regions, in the North and South of Brazil.

According to previous planning, it is proposed to establish, in 1960, in the Oswaldo Cruz Institute, a third dry-smallpox vaccine production unit. This unit will serve the other areas not covered by the two previous units.

Provision is made for fellowships to enable medical officers in charge of the vaccination campaign to observe the development of similar campaigns in other countries.

BRAZIL-39, Public Health Services (Mato Grosso) (See page 190)

In the State of Mato Grosso, which has an area of 1,251,821 Km², there is need for considerable expansion of medical and public health facilities. Although the upper two thirds of the state has been included in the Amazon Valley development project the southern part of the state, potentially one of the richest agricultural areas and whose population has trebled in the last five years, still remains unattended. Malnutrition is widespread and maternal and infant mortality rates as well as morbidity and mortality rates for communicable and other diseases are notably high.

The State Government, with the technical orientation of the Organization, has developed a plan for development of an integrated health service in the six municipalities (counties) comprising this southern portion of the state probably beginning in the District of Dourados and gradually being extended. The state health authority will be the responsible operating agency, but will receive collaboration in the form of personnel, facilities, and financing from the Special Public Health Service (SESP), the National Department of the Child, the National Department of Health and the National Department of Endemic Diseases. UNICEF has been asked to furnish supplies and equipment. An inter-agency council, comprising representatives of each of the afore-mentioned will be established.

Beginning in 1959, the services of one public health nurse and one sanitary engineer, both with experience in similar programs, are provided for in addition to consultants and fellowships.

BRAZIL-41, Malaria Eradication (Sao Paulo) (See page 190)

Malaria is a disease widely spread throughout the State of Sao Paulo. An effective control program has reduced its incidence greatly over a ten-year period. As part of the national malaria eradication program, the State of Sao Paulo carries out a program in the State coordinated with that of the rest of the country.

In developing its malaria eradication program the State of Sao Paulo has prepared a plan of operations and signed agreements of cooperation with the Federal Government and PAHO. The program started in 1958 with the training of personnel and geographical reconnaissance. The preliminary phase will be completed in 1959 and spraying operations will be started by July 1st. Spraying will be done in 191 municipalities with 541,413 houses. In the remaining 224 municipalities, surveillance operations will be performed. Spraying operations will be completed December 1962 and then all the previously malarious areas will be covered by a surveillance program.

The State Government bears all expenses in personnel, installations and operations. The State program will receive by agreement with the National Program material and equipment supplied by ICA.

PAHO will provide the services of consultants, a sanitary engineer, and four sanitarians. Funds will be provided for anti-malaria drugs and laboratory equipment. Fellowships are also provided for the training of personnel in 1959 and 1960.

BRAZIL-42, Rabies Control (See page 190)

The number of human deaths from rabies reported from the Federal District and State capitals of Brazil between 1952 and 1956 showed an increase of 78%. Reports for the city of Sao Paulo showed an average of ten deaths per year from 1950 to 1954, while the interior of the State reported an average of nine deaths per year.

During 1956 in the Federal District alone, 4,825 persons were bitten by animals suspected of being rabid. In those animals where laboratory examination was possible, 639 were found to be positive. In spite of available treatment, four deaths were recorded during this same period.

Bat transmitted rabies which is widespread in Brazil, causes annually large losses to the livestock industry and is also a threat to the human population.

During 1958 the Zone Veterinary Public Health Adviser provided technical assistance in the development and improvement of the Rabies Control Program in the Federal District and in the creation of a National Commission on Rabies Control. Through this project collaboration will be given to develop centrally coordinated rabies control programs throughout the country; to assure availability of adequate amounts of properly tested vaccine and serum; to improve training facilities for both medical and veterinary technicians; and to stimulate research and investigation into all phases of the disease.

Provision is made for consultants and fellowships, supplemented in 1960 by supplies and equipment.

BRAZIL-43, Preventive Dentistry (See page 192)

It is essential that private dental practitioners, many of whom are also part-time governmental workers, be well grounded in preventive methods. In some dental schools, the teaching of preventive dentistry has not been stressed sufficiently, and their graduates still practice essentially curative dentistry.

The objective of this project is to assist selected dental schools, whose teachers of hygiene have been trained in public health, in reviewing their methods of teaching of preventive dentistry, integrating it within the over-all educational program.

During 1958, the Campanha de Aperfeiçoamento de Pessoal de Nível Superior, (CAPEP), a Brazilian federal agency, provided fellowships to teachers of hygiene in dental schools for study in the School of Public Health of São Paulo. One or two fellowships will be granted for the next few years. It is proposed that the Organization, starting in 1960, assist these fellows upon their return to the respective schools, by providing short-term consultants and a limited amount of teaching equipment and supplies. Two dental schools will be assisted each year.

Provision is made for one short-term consultant and a limited amount of teaching equipment and supplies in 1960 and 1961.

BRAZIL-44, Teaching of Public Health in Schools of Veterinary Medicine (See page 192)

Increasing interest in the zoonoses and food hygiene has led to the extension or establishment in national ministries of health throughout the Americas of veterinary public health activities. There is a dearth of properly trained personnel for this work yet inadequate attention is given to preventive and public health aspects in most schools of veterinary medicine. One approach to the problem has been the holding of a seminar on teaching public health in schools of veterinary medicine in 1959 on a region-wide basis under project AMRO-48.

To provide assistance to individual schools in Brazil fellowships are to be provided in 1960 and 1961 for key members of veterinary faculties.

BRAZIL-45, Environmental Sanitation Training (See page 192)

The shortage of trained sanitary engineers and auxiliary environmental sanitation personnel is being felt through Latin America and constitutes one of the factors limiting the development of sound public health programs.

Since 1955, the Organization has cooperated with three centers receiving students from other countries, including the School of Public Health of São Paulo in order to provide improved training facilities. During this time provision was made for fellowships, travel grants for professors of sanitary engineering, supplies, equipment and personnel.

Provision is made during 1959 for fellowships.

BRAZIL-48, Leprosy Control (See page 192)

It is estimated that there are some 90,000 cases of leprosy in the country, which would mean a prevalence rate

of about 2 per 1,000 inhabitants for the country as a whole.

Recently the Government has changed radically the methods that have been used for the control of leprosy, in order to make more effective and dynamic the antileprosy campaign.

The Government is planning to extend its leprosy control activities to the entire country and for this purpose would seek the cooperation of international organizations.

As a phase of this large-scale program the Government is interested in developing a plan for research on the etiologic agent, the pathogenesis and the therapeutics of leprosy. For this purpose the Government has requested the cooperation of the Organization, in order to provide consultants to assist in the planning of the research program to be carried out by the Institute of Leprology.

Provision is made in 1960 and 1961 for the services of short-term consultants.

BRAZIL-51, Yellow Fever Laboratory (See page 192)

The long experience of Brazil with yellow fever and its resources for producing vaccine led to an agreement with the Organization in 1950 for the Oswaldo Cruz Institute to become a vaccine supply center in the Americas as well as Brazil.

Approximately 4,000,000 doses of vaccine were produced in 1958 - 2,960,000 for Brazil and 380,000 doses for other countries in the Americas.

Provision is made for continuing the services of one yellow fever laboratory consultant and for furnishing certain supplies and equipment essential for the manufacture of the vaccine.

INTERCOUNTRY PROGRAMSAMRO-137, Training Center for Malaria Eradication
(São Paulo) (See page 192)

At the beginning of 1958 the operating international training centers for malaria eradication were the ones in Venezuela and Mexico and one in Jamaica being readied to function. The integration of Brazil in the continental eradication program made more acute the need of creating another training center which would help to prepare the necessary technical personnel.

The primary objective of this program is to train personnel for the large Brazilian eradication program and also a number of students from other countries.

Through agreements between the Government, the School of Hygiene and Public Health of São Paulo and the Organization, a training center was established at the School as part of the efforts to train national and international personnel. Initially, courses were planned for doctors and engineers, to which a course for entomologists was added. Teaching material as well as funds for common and contractual services were provided to the School.

During 1958, two courses for doctors and engineers and one for entomologists were given with a total attendance

of 58 students. Another three courses are planned for 1959, with an expected attendance of 60 students.

The international personnel assigned to the Malaria Eradication Program in Brazil will collaborate in the development of the courses. Funds will be provided for consultants, and for other services through an agreement to be effective in 1960.

AMRO-139, Malaria Technical Advisory Services
(Zones V and VI) (See page 194)

This project provides for advisory services for the malaria activities in Zones V and VI to advise and assist international personnel assigned to country projects, as well as give assistance in those countries which do not require full-time international personnel.

Provision is made for a Chief Zone Malaria Adviser.

AMRO-189, Veterinary Public Health (Zone V) (See page 194)

The functions of the veterinary public health adviser for the countries of the Zone are: to provide technical consultation in that field of preventive medicine concerned with food hygiene and the prevention and control of the zoonoses; to advise on the planning, implementation and evaluation of veterinary public health activities integrated into the general public health program; to assist in the selection and training of public health veterinarians, including the organization of courses and seminars; and to assist educational institutions for the training of public health veterinarians and other public health personnel.

Provision is made for a public health veterinarian.

AMRO-201, Health Statistics (Zone V) (See page 194)

The functions of the statistical consultant proposed for the countries of Zone V are: (a) to give advice 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 render assistance 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 phases of projects and assist in the compilation and analysis of information in the countries for purposes of program planning.

Assistance will also be rendered to the University of Sao Paulo, School of Public Health in the development of a course on vital and health statistics for statisticians of the States with emphasis on the collection and analysis of vital statistics, medical certification and case reporting.

Provision is made for a statistician beginning in 1960. Fellowships will be provided in 1961.

AMRO-208, Environmental Sanitation Training (Zone V)
(See page 194)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is now being divided into Zone projects. The fellowships will be awarded for training largely in the schools of Public Health in Brazil, Chile, and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships and one junior sanitary engineer.

PART III

ZONE VI

Zone Office (See page 196)

For text see "Zone Offices," page 16)

ARGENTINAARGENTINA-2, Smallpox Eradication (See page 196)

The Government of Argentina is interested in undertaking a smallpox eradication program and has requested the assistance of the Organization for this purpose, particularly in connection with laboratory equipment for the production of smallpox vaccine.

During 1957 considerable progress was achieved in the improvement of vaccine, the training of personnel, and the development of plans for vaccination programs in certain provinces.

Laboratory equipment is provided for in 1959.

ARGENTINA-3, Nursing Education (Cordoba and El Chaco) (See page 196)

The Government of Argentina is developing a national health plan in which planning and execution of nursing programs at different levels is contemplated. Acute shortage of adequately trained nurses and lack of facilities for training are major obstacles to development of sound health plans in Argentina. There are approximately 120 schools of nursing in Argentina that do not meet the minimum requirements accepted for nursing education; they differ in concept, curriculum, length of studies, requirement for admission, and administration. No advanced courses in nursing or for the training of auxiliary personnel are offered at the present time.

This project, which needs to be considered in relation to Argentina-7 and 23, is being developed in different stages following a preliminary survey of nurse education needs and resources.

The program was started in 1957 with the development of the School of Nursing of the Universities of Cordoba, Nordeste (Chaco) and Litoral (Rosario). Plans for the creation of the School of Nursing of the University of Buenos Aires and University of Cuyo in Mendoza have materialized. During this period of time the Organization has granted 6 fellowships for directors of schools of nursing, supervisors and instructors.

Provision is made for one nurse educator, whose work will be planned in conjunction with the nurse educators in Argentina-7 and 23.

ARGENTINA-4, National Institute of Microbiology (See page 198)

The National Institute of Microbiology (formerly the Malbran Institute) produces many of the biological and chemical products used in the diagnosis and treatment of disease and serves as a center for medical and epidemiological research.

To help the efficiency and improve the scientific standards of the Institute a short-term consultant made a preliminary survey in 1956 and presented a plan for reorganization.

The Institute was given administrative autonomy in 1958, and full-time posts were established for certain technical personnel. Some fellowships were granted by the Organization that year.

Provision is made during 1959-61 for three specialists to assist in developing activities in pharmacology, bacteriology, and virology. Provision is also made for fellowships for the training of specialists in various aspects of public health laboratory work.

ARGENTINA-7, Public Health Services (See page 198)

The study of public health needs and resources pointed out the necessity for a program of integrated health services to serve as a demonstration in a National Public Health Plan. This began with a long-term program to set up an integrated health service in the Chaco Province.

Progress was made in 1957 in the preparation of a detailed plan of operations; in the establishment of an adequate budget; in the selection and recruitment of suitable professional public health personnel; in coordination of national and provincial activities; in the decentralization of services and activities and the training of personnel, locally and abroad.

The organization of the Provincial Health Service and of the health centers in the area Resistencia-Barranqueras was promoted in 1958, as well as the biostatistics and environmental sanitation programs. A survey was made of the hospitals in the Province, as also a detailed study on the condition and needs of the Hospital Ferrando. Full-time posts were created for 8 physicians, one engineer, three nurses, seventeen sanitarians and three statisticians. Twenty-six fellowships have been granted to physicians, engineers, nurses and other professional personnel to specialize in public health. Training courses were carried out for 12 nurses, 40 nursing auxiliaries and 18 sanitation auxiliaries. Also significant is the preparation of a sanitary code which will help to consolidate the structure of the service and the public health activities in the province.

Emphasis will be placed successively in 1959, 1960 and 1961, on consolidation of the structure of the Ministry and the Provincial Health Service, the approval and putting into effect of the Provincial Sanitary Code, the continuation of personnel training programs, the organization of health services, the perfecting of field work and the improvement of hospital organization and its integration with health programs. Extension to at least one other province is also planned.

Provision is made for the services of a medical officer, a health educator, a sanitary engineer and a public health nurse, for the period 1959-1961. In 1961 provision is being made for another team of advisers to assist with the continued expansion of the project and for fellowships.

ARGENTINA-8, Malaria Eradication (See page 198)

The malarious area covers approximately 270,400 Km², with an estimated population of 2,210,000; this area includes 23,400 Km² where malaria has been eradicated and 26,200 Km² where transmission has been interrupted, and in these it is necessary to maintain a service of constant surveillance until the entire program has been completed.

The national plan for malaria eradication was approved early in 1959. By July 1959 it is expected to complete the geographic reconnaissance in Salta and Jujuy, as well as the epidemiological survey of Chaco, Formosa, Corrientes, Misiones, and Santiago del Estero.

By August 1959 it is expected to begin total coverage with residual-action insecticides throughout the malarious area to be continued for a period of four years. Evaluation operations will be carried on simultaneously and in coordination with the total coverage. During the first year a total of approximately 80,830 houses will be sprayed (161,660 sprayings).

UNICEF is collaborating in this program by providing insecticides, laboratory equipment, spare parts for sprayers, and transportation equipment for the spraying and evaluation operations. The Government has undertaken to spend at least 116,760,474 pesos to finance the conversion period and the four years of total coverage.

Provision is made for supplies of antimalarial drugs, and for fellowships to train national personnel for the campaign.

ARGENTINA-11, Rabies Control (See page 198)

There are at least three major foci of canine rabies in Argentina: (a) the provinces of Mendoza and San Juan; (b) Greater Buenos Aires; and (c) Cordoba. In each of these areas the disease reached epidemic proportions in 1955. Rabies also exists in the sylvatic bat-transmitted form in the northern part of the country, causing large losses to the livestock industry.

Provision is made in 1959 and 1960 for short-term consultants in rabies laboratory techniques and vaccine production as well as in the development and operation of field control measures.

ARGENTINA-13, PAHO Public Health Administration Fellowships (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.

ARGENTINA-15, Nutrition (See page 200)

Despite extensive food resources there has been considerable concern over the nutritional status and feeding habits of the population, the causes for existing dietary deficiencies, and the availability of food. To evaluate the problem and methods of correction a survey is planned, wide in scope, to include clinical and laboratory research.

The eventual nutrition program envisages the planning and development of nutritional education, the training of dietitians and auxiliary personnel, as well as the

integration of nutrition activities with general public health programs.

To carry out the study, it is necessary to train the needed personnel. For this purpose it is planned to organize in 1959, in Argentina, training courses on nutrition and diet surveys, (see project AMRO-182).

In 1959, the Organization is providing the services of a short-term consultant who will assist in the above-mentioned courses. In 1960 and 1961, there are funds for fellowships and short-term consultants to collaborate in the planning of the School of Nutrition and in strengthening the Institute in its clinical, laboratory and statistical analysis activities, as well as in the preparation of a nutrition program for the country.

ARGENTINA-17, School of Public Health (See page 200)

In 1958, a commission formed by representatives of the Faculties of Medicine of the Universities of Buenos Aires, Litoral and Cordoba, and of the National Ministry of Social Welfare and Public Health, was appointed to study the creation of a school which would train personnel specialized in public health of whom there is a serious shortage. This commission, after considering the organization and character of public health services in the country, the needs, type of personnel to be trained, quality and quantity of present training resources, and other information, submitted a project that includes the basis for the organization and operation of a School of Public Health under the Faculty of Medicine of the National University of Buenos Aires. This commission was assisted by the Organization to visit the Schools of Public Health at Sao Paulo and Santiago, and a consultant of the Organization collaborated with the commission in the preparation of a final report on this project.

The School has now been created as a dependency of the Faculty of Medicine of the University of Buenos Aires.

Provision is made for the services of a short-term consultant, and fellowships for the teaching body of the School plus some teaching supplies and equipment. In 1960 a professor of public health will be assigned to the School.

ARGENTINA-18, Medical Education (See page 200)

With the reorganization of medical education in Argentina, beginning in 1956, the need of several Faculties for assistance in various aspects of the programs, particularly in connection with the teaching of preventive medicine became apparent. Strengthening of the teaching staffs through special training locally and abroad, reorganization of the curriculum, modernization of teaching methods, and increase in teaching equipment and supplies will receive special attention.

This project is part of the general program for the strengthening of medical education in Latin America, including AMRO-18 and other individual country projects.

Six fellowships were granted during 1958 under this program, to members of the teaching staff of various Argentine Faculties of Medicine.

Provision is made for short-term consultants and fellowships.

ARGENTINA-20, Tuberculosis Control (See page 200)

In 1960 a survey will be started to determine the prevalence of tuberculosis in Argentina, as a preliminary step in organizing and developing at a later date a program for the control of this disease. The study will cover population groups, representative of the area in which they reside, in two regions of the country: (a) The North Zone, covering the Provinces of Corrientes, Chaco, Formosa, and Misiones, with approximately 1,600,000 inhabitants; and (b) The Patagonia Zone, covering the Provinces of La Pampa, Rio Negro, Neuquen, Chubut, Santa Cruz, and Tierra del Fuego, with a population of 600,000.

It is expected that UNICEF will provide part of the supplies and equipment required.

Provision is made for the services of one medical officer, one nurse, and one statistician, beginning in 1960. Fellowships will be awarded also in 1961.

ARGENTINA-23, Nursing Education (Rosario) (See page 202)

The background information, fundamental objectives and plan of action on which this program is based, are similar to those for the project Argentina-3, Nursing Education.

To create a school of nursing within the Faculty of Medicine in Rosario, the University of Litoral granted fellowships to three nurses who were to receive training as instructors; created the Nursing Department in the Centenario Hospital, a teaching institute of the Faculty, and made allotments in the budget for this program.

Collaboration by the Organization has the following objectives: (a) to prepare professional nurses capable of assuming teaching, administrative and supervisory functions in nursing; (b) to improve nursing services in which students will obtain clinical experience; (c) to begin activities in public health nursing; and (d) to collaborate in the training of the teaching personnel and those giving nursing services.

The program was begun with a preliminary survey of existing facilities and resources for the organization of the School. An experimental nursing curriculum was prepared as well as the budget for its implementation; an intensive campaign for the recruitment of students was carried out; and the training program for supervisors and instructors was begun. The first class was admitted in 1959.

Provision is made for two nurse-educators, teaching material and supplies and fellowships to train a group of instructors and supervisors.

ARGENTINA-24, Planning and Organization of Hospital Services (See page 202)

The country has 4,531 medical care services (2,479 hospitals with 132,531 beds and 2,052 services without beds). Approximately 85 per cent of these are public services.

In a study of the problems, resources and organization of health services, and recommendations for their improvement, which was made with the collaboration of the Organization, the conditions under which hospitals operate were analyzed. The magnitude and complexity of the problem requires short and long-term plans of action.

The program envisages: (1) the development of an administrative structure for medical care and hospital planning and organization at national and provincial levels; (2) preparation of a training and specialization program for hospital personnel in all categories; (3) supervision, evaluation and perfecting of the national plan on hospital and health policy; (4) creation of demonstration and teaching areas with standard hospitals operating within an integrated health plan; and (5) specialization of personnel, hospital directors, university graduate nurses, and statisticians, in the organization and administration of services.

The Organization is providing the services of a hospital administrator and fellowships.

ARGENTINA-25, Training of Professional and Auxiliary Nursing Personnel (See page 202)

The background of this project is similar to that of the other nursing projects in Argentina (see Argentina-3 and 23). The objectives of this project are: (a) to organize the nursing department of the Bernardino Rivadavia Hospital; (b) to prepare specialized nurses in administration and supervision of nursing services; (c) to train nurse-instructors to teach nursing auxiliaries; (d) to develop courses for nursing auxiliaries; (e) to establish training centers in the provinces for professional and auxiliary nursing personnel.

This program will be undertaken by the Nursing Section of the Medical Care Department, Ministry of Welfare and Public Health, in coordination with hospital authorities of the capital. Its extension to the provinces will be undertaken in coordination with the nursing departments of the provincial ministries of welfare and public health.

Provision is made for one nurse-educator and for fellowships beginning in 1960.

ARGENTINA-26, National Institute of Rehabilitation (See page 202)

The National Commission for the Rehabilitation of the Handicapped created in 1956 the Ministry of Social Welfare and Public Health, is undertaking on a national scale the physical, emotional and socio-economic rehabilitation of people with a lessened work capacity resulting from congenital or acquired affections. The Commission has an annual budget of thirty million pesos and resources to organize and develop a methodical plan.

The Organization will collaborate in developing a training program for needed professional and technical personnel in rehabilitation, beginning with preparation of teaching staff.

It is planned as soon as the teaching personnel for the different specialties of rehabilitation becomes available, to create a Technical School in Rehabilitation. With the advisory services of the consultants, intensive courses for medical, technical and auxiliary personnel will be developed, giving preference to provincial services. A census of the handicapped will be completed. Attention will also be given to means and resources for coordination of services, and improvement of the technical and administrative structure of the National Commission. Prevention of accidents will be studied, advising and collaborating with industrial and labor sectors, and the revision of existing legislation will be promoted.

In 1958, the Organization and the Sister Elizabeth Kenny Foundation provided two consultants in the technical-administrative reorganization of the Departments of Occupational Therapy and Physio-therapy and the training of the personnel for these specialties in the National Rehabilitation Institute in Buenos Aires. Two fellowships were granted for technical personnel, and teaching material and equipment was provided.

The training program in the Capital will be intensified during 1959 and similar courses will be programmed for the services in the interior of the country.

Funds are provided for short-term consultants and fellowships.

ARGENTINA-27, Training of Personnel for Mental Health Programs (See page 204)

There are 15 psychiatric hospitals in Argentina with approximately 20,000 patients. The Government has recently created the National Institute of Mental Health to deal with all phases of the mental health problem on a national scale. It has the following objectives: to assist in the prevention of mental disease; to give total patient care, including social recuperation and rehabilitation; to promote research; to give technical assistance to and coordinate activities of all national, provincial, municipal, and private agencies; and to prepare the necessary personnel.

It is proposed to set up a pilot training center for the preparation of: (a) senior staff able to plan, administer and supervise mental health programs; (b) teaching personnel for the training of physicians for the medical care of patients; (c) public health nurses with specialization in mental health; (d) physicians and nurses for rehabilitation programs; and (e) other professional and auxiliary personnel as needed.

Provision is made for a nurse-educator specialized in mental health, for a short-term consultant in occupational therapy and for fellowships in 1960 and 1961.

ARGENTINA-51, Aedes aegypti Eradication (See page 204)

The area infested with *A. aegypti* extends from the North of Argentina down to parallel 40° in the South, and from the East to the elevation of 1,400 meters in the pre-cordillera to the West. Periodical occurrence of jungle yellow fever in contiguous zones and the fact that the vector has already been eradicated from neighboring countries make essential prompt eradication of the mosquito from Argentina.

Eradication activities began in 1953 and in 1954 an agreement was signed for the development of a national campaign. Field operations commenced in 1955 in the city of Corrientes where a training center for inspectors was established. Perifocal treatment operations have spread from that center. At 31 December 1958, a total of 2,123 localities had been inspected, *A. aegypti* having been found in 145 of them. In the six sectors established in the Plan of Operations, activities are almost finished in Sector II (Corrientes); they are very advanced in Sector I (Tucuman); work has begun in Sector III (Santa Fe) and continues in Sector V (Capital and Greater Buenos Aires).

A new letter-agreement was signed during 1958 whereby the personnel, budget and facilities necessary to end the campaign in three years are provided.

Provision is made for one medical officer and three sanitarians in 1959. One less sanitarian is provided for in 1960 and 1961.

CHILE

CHILE-18, (WHO/TA), CHILE-26 (PAHO), Public Health Health Administration Fellowships (See page 204)

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

CHILE-19, Food and Drug Control (See page 204)

The National Health Service is responsible for administering the various legal dispositions pertaining to the control of food and drugs. In accordance with these regulations, the Service must approve the importation, manufacture and distribution of all therapeutical agents and pharmaceutical, biological and chemical products, as well as foodstuffs.

A consultant of the Organization carried out a study of the methods currently employed in this activity and made recommendations for improvement based on training of personnel and acquisition of indispensable supplies and equipment.

In accordance with the recommendations of the Consultant, funds are provided for fellowships and a limited amount of equipment and supplies in 1960-61.

CHILE-20, Midwifery Education (See page 206)

The midwifery schools of the University of Chile in Santiago and Valparaiso operate with the collaboration of the National Health Service and train the midwives for the Service.

The objectives of this program which will have a duration of five years are: (a) to study the present situation and needs in obstetric care in order to determine the type of training required by midwives and auxiliaries in this field; (b) to establish courses for midwifery instructors and in-service obstetric personnel; (c) to expand and strengthen the curriculum of professional midwifery training; (d) to prepare fields for the clinical experience of midwifery students, graduate midwives and auxiliaries; and (e) to collaborate in the improvement of maternal and child health services.

Provision continues to be made for a nurse educator, fellowships, and a small amount of teaching equipment and supplies.

CHILE-21, Rehabilitation Center (See page 206)

Approximately 5,500 accidents resulting in partial or total disability of the victim occur each year in Chile. Available statistics show that 2,000 of these disability cases result from industrial accidents and occupational diseases. Traffic accidents which in themselves represent the seventh major cause of death in the country, are not included in these figures. A great majority of the disability cases occur in the age-group 18 to 35 years and represent a high loss in terms of man-days of labor each year.

The National Health Service has technical and material resources to cope with certain aspects of the problem but these are not properly coordinated. The organization of a model rehabilitation center in Santiago would make possible the coordination and full use of the dispersed services now in operation, as well as the extension of their activities. The center would provide services in all phases of rehabilitation and would be used to train technical and auxiliary personnel for service throughout the country.

It is proposed that the Organization collaborate in the first phase of the program by providing a rehabilitation expert to make a study of the problem in Chile, evaluating present resources and making the pertinent recommendations. In the second phase, the program would be implemented on the basis of the consultant's recommendations.

Provision is made for short-term consultants, fellowships, travel grants, and supplies and equipment in 1960. A medical officer will be assigned to the project in 1961.

CHILE-22, Institute of Occupational Health (See page 206)

An institute of occupational health to provide services and training facilities needed in Chile would also be available for international use. The institute would utilize the facilities of the School of Public Health and of the National Health Service. Its objectives will be: (a) to give service and advice to the Government and to private industry in the field of occupational health; (b) to contribute to the training of personnel (physicians, engineers, nurses, and others) for occupational health work; (c) to conduct research in occupational health problems; and (d) to promote occupational health work through conferences, national and international meetings, seminars, and other appropriate means.

Provision is made for short-term consultants, fellowships, and supplies and equipment in 1959 and 1960.

CHILE-27, Public Health Services (Ovalle-Copiapó)
(See page 206)

The objective of this project is to extend and develop an integrated urban and rural public health program in the northern part of Chile in the provinces of Ovalle and Copiapó. The program includes the improvement of maternal and child health services; environmental sanitation, particularly potable water supply and sewage disposal; control of communicable diseases; and improvement of general medical-care services. The plan calls for training courses for nursing and midwifery auxiliaries, a health education program, and public health laboratories.

An important aspect of the project is the intensive occupational health program that is being planned to improve health conditions among workers. Mining is the chief basis of the economy of the provinces of Ovalle and Copiapó, and the construction of mineral-processing plants has led to the opening of a large number of medium-sized mines, with consequent increase in the number of workers and their families. It is desired to eliminate unsafe conditions, from the viewpoint of both accidents and occupational diseases, especially pneumoconiosis. Epidemiological surveys indicate that the prevalence of silicosis is very high.

The project began in 1958 with the development of rural health services, training of personnel, and expansion and improvement of existing health services. It is expected that UNICEF will provide supplies and equipment for the maternal and child health and environmental sanitation activities. The Organization will provide the services of short-term consultants in industrial hygiene.

Provision is made for short-term consultants in all three years and some supplies and equipment in 1960.

CHILE-29, Advanced Nursing Education (See page 208)

The objectives of this project are: (a) to assist the training program in nursing supervision and teaching, a program which helps nurses recognize and solve problems as well as plan, develop and evaluate programs of nursing education and administration; and (b) to demonstrate high quality of nursing services through improvement in selected institutions where students obtain their practical experience. Students include nurses both from Chile and other Latin American countries; 10 places are reserved for the latter (see AMRO-28).

During the first two years, 1955-56, the project was devoted to the training of supervisors and instructors in communicable-disease nursing; in the third year, 1957 the fields included medical, pediatric, communicable disease and public health nursing. The program will be extended to the field of maternal and child health.

Since the beginning of the program, 36 nurses and 4 midwives from Chile and 30 nurses from other Latin American countries have received training. Three fellowships were granted for studies abroad to members of the teaching body of the course.

Provision is made for the services of a nurse-educator, fellowships, teaching supplies, and equipment.

CHILE-30, Training for Laboratory Technicians
(See page 208)

A new School for Laboratory Technician is planned. The students of this school are high-school graduates who undergo a three-year period of theoretical and practical training in all aspect of technical laboratory work. Once trained, the technicians are employed in various units of the National Health Service where laboratory work is constantly growing.

Provision is made for the advisory services of a consultant in 1961 to advise on the organization, curriculum, training methods, and administration of the school.

CHILE-31, School of Public Health (See page 208)

The objective of this project is to strengthen teaching in the School of Public Health of the University of Chile and to expand the facilities for education of students from other countries of the Americas. Previously, aid was given to the school under project AMRO-16 through which several faculty members of the School have had the opportunity of visiting the countries from which their students come in order to adjust their teaching to the health organization and general conditions in those countries. The School has been furnished the services of visiting professors, travel grants to professors for observation of teaching methods and curriculum planning in other institutions, and a limited amount of materials.

Provision is made for a consultant and fellowships for faculty members.

CHILE-34, Training of Nursing Auxiliaries (See page 208)

One of the main problems confronting the National Health Service in its plans for the provision of adequate health services, is the limited availability of professional nurses and the lack of properly trained auxiliary nursing personnel.

A permanent national program is therefore planned for the training of nursing auxiliaries especially in maternal and child care, control of communicable diseases and education in the home.

The program has as its immediate objective the training of 600 nursing auxiliaries for rural services in ten training centers distributed throughout the country. The first stage, with a duration of three and a half years, will cover the services in Antofagasta, Valparaíso, Santiago, Talca, Linares, Chillán, Concepción, Temuco, Valdivia y Puerto Montt.

The contribution of the Government in the three years and a half of the program will reach Ch. \$700,000,000.

UNICEF will provide material, supplies, equipment and vehicles for a value of US \$102,000 approximately.

Provision is made for a nurse-educator to be assigned to this project beginning in 1960.

CHILE-35, Nutrition (See page 208)

The food consumption surveys that have been carried out in Chile since 1928, show that the country does not produce food in sufficient quantity to meet the needs of the population. Approximately 90 million dollars are invested annually to import foodstuffs. A high percentage of the national diet is based on carbohydrates. There is a notorious deficit of proteins, calcium and vitamins.

A national program to improve feeding habits in vulnerable groups will be developed in the Provinces of Atacama, Coquimbo and Linares. The program includes school breakfasts and education in nutrition at the school and community levels, school and family vegetable gardens. The National Health Service collaborates with UNICEF and WHO at present in carrying out programs in maternal and child care and environmental sanitation in these provinces. The program will cover 56,000 school children in 100 schools and will have a duration of three years. The national services in health, agriculture, general elementary education and school assistance are participating in this program as well as FAO.

The Organization will provide assistance through its technical staff. Fellowships will be provided in 1961.

CHILE-36, Aedes aegypti Eradication (See page 208)

Operations against *A. aegypti* were begun in Chile in 1946 and intensified in 1949 in connection with the continental eradication program following the resolutions of the Pan American Sanitary Organization and the sanitary conventions signed with neighbouring countries. After determining and treating the area infested, 44 localities, no *A. aegypti* was found in 1954-1956, and the campaign was

considered finished in May 1958. During the final verification work prior to the official declaration of eradication of the species in the country, the vector was found in one locality.

The purpose of this project is to assist in carrying out a new survey so that eradication may be completed.

Provision is made for one sanitarian and for short visits by a staff medical officer in 1959 and 1960.

CHILE-37, Medical Education (See page 210)

Modern medical education places great stress on teaching in small groups. Although the faculties of the medical schools in Chile have a high degree of technical competence, experience has chiefly been in presenting lectures. The need for further orientation in proper utilization of techniques for teaching small groups is recognized.

Provision is made for a group of short-term consultants to assist in this orientation and necessary supplies and equipment in 1961.

PARAGUAY

PARAGUAY-1, Malaria Eradication (See page 210)

It is estimated that in Paraguay the malarial zone covers an area of approximately 42,286 Km² inhabited by 45 per cent of the population of the country. The disease takes the form of a mild endemic with epidemic outbreaks every five years due to invasions of the *A. darlingi*.

The malaria eradication plan was prepared in 1956 after an extensive investigation carried out in 1955 and the conversion stage from control to eradication has been overcome. By November 1958 the first spraying cycle had been completed, with the application of dieldrin to the inside walls of 147,809 houses. The epidemiological survey was carried out simultaneously with no evidence of transmission of *P. falciparum* in the area covered.

UNICEF collaborates by providing vehicles, equipment and supplies. ICA contributes to the control, maintenance and operation needs of the vehicles. The Government has budgeted the funds necessary for the development of the program in the five year period.

Funds are provided for medical officer and a sanitarian in 1959. A sanitary engineer and another sanitarian will be added in 1960. Provision is also made for supplies, equipment, and fellowships.

PARAGUAY-9, Leprosy Control (See page 210)

Since 1954, the Organization collaborates with the Government in the epidemiological study of leprosy and in the establishment of a control program. The high prevalence of this disease determined that it be considered an important public health problem.

A survey begun at the end of 1955, covered approximately 150,000 people, and 1,279 new cases were discovered.

The resulting national control plan is based on ambulatory therapy with sulphonic drugs; compulsory isolation is not practiced. Intensive work during 1959, 1960, 1961,

aims to discover new cases, give early ambulatory treatment investigate foci, supervise contacts, and provide health education. Permanent services for the treatment of acknowledged cases are being gradually established, integrated within the work of the Health Centers. A total of 552,658 people have been examined to date, up to 99 per cent in some districts.

UNICEF participates in this program with the provision of equipment and supplies.

Funds are provided for one leprologist.

PARAGUAY-10, Public Health Services (See page 210)

The basic purpose of this project is to provide the largest number of inhabitants with complete public health services through (a) improvement of existing services and the reorganization and establishment of regional, departmental, and local services, in accordance with the Five-Year Plan drawn up with the advice of the Organization in 1957 and put into operation in 1958; (b) continuation and modernization of the work in epidemiology and control of communicable diseases; (c) improvement of the central public health laboratory; (d) strengthening of the central services; (e) drafting of a National Sanitary Code and related regulations; and (f) expansion of training programs.

The Organization has collaborated with the Government since 1950 to strengthen public health services, first with respect to the study, control, and solution of specific urgent public health problems, such as maternal and child health, tuberculosis, venereal diseases, and hookworm disease, and later in the consolidation of these activities and their integration in a general health program. For purposes of demonstration, some of these programs were concentrated in a limited geographical area, and now they have been extended throughout the country.

The influence of these activities on the development and strengthening of the national health organization is evident. The public health budget in 1957 was six times that of 1952. When the program started, there were no full-time posts, but in 1958 57 per cent of the technical staff, including 77 medical officers (47 health center directors), 10 dentists, and 6 engineers, were employed full-time. In seven-month courses for nursing auxiliaries, and nine-month courses for auxiliary sanitation and health education workers, 148 persons were trained. The majority of senior technical posts are filled by trained personnel.

Priority will continue to be given to training activities and to the other phases mentioned above.

UNICEF is providing a certain amount of supplies and equipment and has recently made an additional contribution to the Five-Year Plan.

Provision is made for a chief country adviser, an epidemiologist, a sanitary engineer, a public health nurse, and a bacteriologist. To the group of consultants there will be added in 1960 an administrative methods officer, and in 1961, a sanitarian. This collaboration will be adapted to the development of the program planned and to the progress made.

PARAGUAY-13, PAHO Public Health Administration Fellowships (See page 212)

Provision is made for fellowships to collaborate with the Government in training staff for the improvement

and expansion of its health services.

PARAGUAY-16, Administrative Methods and Practices in Public Health (See page 212)

Since 1950 collaboration by the Organization has contributed to notable development and consolidation of national health activities. In this process the need for improvement in administrative methods has become more apparent.

On the basis of Resolution XXXV of the Tenth Meeting of the Directing Council of the Organization, advisory services were rendered in administrative methods and procedures, through a consultant appointed to assist in practical application of norms and measures in the following fields: (a) budget administration; (b) control of funds, receipts and payments and rendering of accounts; (c) procurement, distribution and utilization of capital and consumer goods; (d) inventory and control of stock; (e) personnel, and (f) inspection and auditing procedure.

Provision is made in 1959 for a consultant to continue activities leading to introduction of improved techniques of administration. This activity becomes part of project Paraguay-10 in 1960.

URUGUAY

URUGUAY-5, Public Health Services (See page 212)

The objective of this project is to improve the health of the population in the interior of the country, bringing preventive and curative services to the largest possible number of persons, by (a) strengthening present public health services and expanding their scope in the promotion, protection, and restoration of health by means of new centers and subcenters; (b) coordinating, under the direction of the Ministry of Public Health, of the institutions that operate in the field of public health; (c) training the necessary personnel, at all levels, for the development of local programs; and (d) providing health education to achieve a properly organized and informed community.

The Departments of Rivera, Artigas, Salto, Tacuarembó, and Durazno have been selected for the operation of this project; in each one, activities to be developed, as a minimum, will be related to maternal and child care, communicable disease control, and the improvement of environmental sanitation.

The project was begun in 1956 with the appointment of a full-time director and a chief nurse. In 1958 agreements on coordination were entered into with the Central Council of the Family Allowance Fund and with the Departmental Council of Rivera, and these agreements will make possible large contributions to the project. Various agencies, such as the National Sanitation Authority, the Geological Institute of Uruguay, and the other Departmental Councils, have also agreed to cooperate with the plan.

Local activities were begun in the Department of Rivera with the smallpox vaccination of 90 per cent of the population. Since the end of 1957 the project has been expanded with the establishment of the center at Minas de Corrales, covering a rural population of some 10,000 inhabitants.

By the end of 1958, 47 new nursing auxiliaries and 25 environmental sanitation workers had been trained.

In addition to the training courses for the auxiliary personnel, 73 fellowships have been awarded to physicians, nurses, engineers, veterinarians, statisticians, and sanitary inspectors for study in the field of public health.

Once the model public health services have been established in the selected areas, they will be extended to the rest of the country. The project is expected to last for a period of five years.

The project is being carried out with the aid of supplies and equipment provided by UNICEF.

Provision is made for a chief country adviser, a sanitary engineer, and a public health nurse.

URUGUAY-9, Chagas' Disease (See page 212)

Epidemiological studies, particularly in the Departments of Rivera, Artigas and Paysandu, indicate that Chagas disease is endemic in more than half of Uruguay. Approximately 500,000 people are exposed to it and it is estimated that 50,000 are already infected.

Spread of this disease may be controlled effectively with the application of residual insecticides.

Funds are provided for the services of a short-term consultant and fellowships in 1961.

URUGUAY-10, PAHO Public Health Administration Fellowships (See page 212)

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

URUGUAY-13, Training of Public Health Personnel (See page 212)

A considerable problem in the development of public health programs in Uruguay is the shortage of professional technical and auxiliary personnel. The Ministry of Public Health has a School of Health and Social Service from which depend schools that prepare graduate nurses and social workers respectively. There are also various short training programs for auxiliary personnel. All technical and auxiliary personnel entering the service of the Ministry must by decree have previously completed the pertinent courses of this School.

The programs of the School are to be expanded including: (a) revision of the curriculum of basic nursing education to adapt it to the needs of the country; (b) development of short courses in nursing administration and supervision; (c) establishment of courses for nursing instructors and auxiliaries both for hospital and public health nursing; (d) improvement of the clinical and practical fields for these students, and (e) organization of courses for environmental sanitation personnel. Also, following a long-range objective, advanced courses for professional and technical personnel of the Ministry will be organized, in accordance with the needs of the service.

Provision is made for a nurse-educator, teaching material, equipment, and fellowships. A sanitarian will be added to the project in 1960.

URUGUAY-15, Waterworks Operators School (See page 214)

Uruguay has 201 water supply systems, 24 filter plants, 24 sewage systems, and 17 purification plants. The personnel operating these plants have not received adequate training. The agency directly responsible, the State Sanitation Works, is interested in organizing a school for this personnel, to be operated in connection with the School of Engineering and the Ministry of Public Health. The School of Engineering of the University will organize a permanent school for operators of waterworks and sewage treatment plants.

The purpose of this project is to train waterworks operators in methods and practices for improving the operation of existing installations, improving the quality of water, and maintaining installation and equipment.

The Organization will furnish the services of consultants specialized in plant design and operation to give technical advice in the organization of the course, to visit the students at their respective plants, and to prepare some teaching material. In addition, provision is made for the equipment required to complete the present chemistry laboratory of the School of Engineering, preparing it to carry out accurate bacteriological and chemical analysis and to give instruction in this subject.

URUGUAY-16, Chronic Diseases (See page 214)

Over 50 per cent of the deaths in Uruguay are due to chronic diseases affecting the more advanced age group.

There is need for a thorough study of the epidemiology of chronic diseases and for determining what planned and systematic action can be taken by official agencies. For this purpose, the Ministry of Public Health can count on the cooperation of almost all the country's hospitals and polyclinics, as well as on the cancer investigation and control centers, which will be the key source in this study. Furthermore, it is estimated that 75 per cent of the country's population lives in urban areas, a fact that gives greater access to the medical centers.

Provision is made for short-term consultant services by an epidemiologist specialized in this field and for fellowships in 1960 and 1961.

INTERCOUNTRY PROGRAMS

AMRO-159, Health Statistics (Zone VI) (See page 214)

The functions of the statistical consultant proposed for the countries of Zone VI are: (a) to give advice 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 render assistance in the selection and follow-up of fellowship students and in the development of seminars, work-shops, 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 countries for purposes of program planning.

Provision is made for one health statistician to serve the countries of Zone VI beginning in 1959.

AMRO-163, Epidemiology (Zone VI) (See page 214)

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 new methods and techniques of control; (c) to coordinate the programs of eradication and 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 one epidemiologist.

AMRO-209, Environmental Sanitation Training (Zone VI)
(See page 214)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. A beginning has been made through the previous region-wide project AMRO-1 which is

now being divided into zone projects. The fellowships will be awarded for training largely in the schools of Public Health in Brazil, Chile, and Mexico, as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1960 and 1961.

AMRO-210, Medical Education (Zone VI) (See page 214)

In many countries, the development of schools of medicine requires repeated direct advice on a continuing basis. For this reason it is proposed that beginning in 1961 a medical educator be assigned to Zone VI to study the status of teaching in the schools of the Zone, give advice and consultation to individual schools as requested, make recommendations as to other help that could be provided by PAHO, prepare a plan for the promotion of medical education in the Zone, and strengthen collaboration with other interested agencies, governmental and private.

The provision is for one medical educator in 1961.

PART III

WASHINGTON OFFICE - COUNTRY PROGRAMS

CANADACANADA-1, WHO Public Health Administration Fellowships
(See page 216)

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

CANADA-2, Consultants in Specialized Fields of Public Health (See page 216)

Short-term consultants will be made available, as needed, for specialized problems in public health. In the past these have been on subjects such as schistosomiasis, care of the mentally retarded and public health nursing.

Provision is made for short-term consultants.

UNITED STATES OF AMERICAUNITED STATES-7 (WHO), UNITED STATES-11 (PAHO), Public Health Administration Fellowships (See page 216)

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

UNITED STATES-10, Consultants in Specialized Fields of Public Health (See page 216)

Short-term consultants will be made available, as needed, for specialized problems in public health. In the past these have been on subjects such as schistosomiasis, care of the mentally retarded and public health nursing.

Provision is made for short-term consultants.

FIELD OFFICE - EL PASO (See page 216)

The length of the Mexico-U.S. frontier and the large number of cities and towns whose health problems affect the whole community but whose administrations are divided by the border, lead to health problems necessitating international action. The El Paso Office, responsible to the Washington Office, was established to collaborate with local health authorities on both sides of the border in the solution of common health problems. Its activities include: (a) stimulating and promoting joint study and planning of health activities in border communities for the mutual improvement of health services and the solution of health problems, that is, by promoting and assisting in the development and operation of joint councils; (b) providing a channel for the exchange of epidemiological and other public health information between border health authorities; and (c) acting as secretariat for the Mexico-U.S. Border Public Health Association.

Provision is made for a Chief of Field Office, one administrative officer, and two clerk stenographers. It is planned to add a sanitary engineer to the staff in 1960 and a public health nurse in 1961. Provision is also made for consultants and for common services.

INTERZONE

AMRO-1, Environmental Sanitation Training (See page 218)

This project provides fellowships for sanitary engineers and auxiliary personnel who will form a nucleus of workers in this field to strengthen both national and local health departments. Ninety-five awards have been made to sanitary inspectors and sanitary engineers under this project as of 1958. The fellowships will be awarded for training largely in the schools of public health in Brazil (Brazil-45), Chile (Chile-33), and Mexico (Mexico-35), as well as the School of Sanitary Engineering in the latter country.

Provision is made for fellowships in 1959 in this project. Fellowships are identified by Zones in 1960 and 1961.

AMRO-10, Inter-American Program of Education in Biostatistics (See page 218)

This project was begun in 1953 for the purpose of improving vital and health statistics in the Latin American countries by training technical personnel of the various statistical services. A training center was developed at

the School of Public Health of the University of Chile, and annual courses consist of four months of basic academic studies and five months of more advanced training and field work. A total of about 218 students from 19 countries have received training.

The international experts provided by the Organization participate both as professors in the academic phases of the program and as consultants to the Government of Chile for the improvement of statistical services.

Provision is made for fellowships and a grant to the School of Public Health for expanding their staff and for local, technical and secretarial personnel.

AMRO-16, Assistance to Schools of Public Health
(See page 218)

The governing bodies of the Organization have repeatedly emphasized the need for strengthening the basic training of professional public health personnel. The aim of this project is to strengthen teaching in the schools of Public Health in the Region. Under this project, which was formerly part of AMRO-18 (then entitled Medical and Public Health Education), many professors of schools of

public health have had the opportunity, since 1953, of visiting the countries from which their students come, in order to adjust their teaching in the light of health organization and general conditions in those countries, as well as, in certain instances to visit other countries and schools of public health to observe newer teaching procedures and discuss curriculum planning. Visiting professors have dealt with such subjects as epidemiology, health education, biostatistics, and nutrition. Materials have been provided in a limited amount, inasmuch as equipment is not a primary objective of this project. Short-term consultants and a number of fellowships have also been provided.

Individual projects have now been developed for the majority of schools.

Provision is made in 1959 and 1960 for short-term consultants and fellowships.

AMRO-17.5, Waterworks Training Course (See page 218)

In 1959, courses for waterworks operators are being assisted in individual countries, including, in one of the courses, training of personnel from adjacent countries. Provision has been made for fellowships, supplies, and short-term consultants. This project will be integrated into the AMRO-187 project for 1960 and 1961.

AMRO-18, Medical Education (See page 218)

Expansion of the Organization's program in regard to medical education has led to establishment of several specific projects in individual countries, (Mexico-32, Argentina-18). In addition certain specific intercountry projects have been organized notably AMRO-49, Seminar on Teaching of Preventive Medicine; AMRO-68, Survey of Pediatric Education; AMRO-102, Seminar on Pediatric Education.

To extend these advisory services to other countries and to cover important specialized needs such as assistance to the development of medical schools, libraries and training in statistics, this project makes provision for short-term consultants, visiting professors, fellowships for teaching personnel for further training abroad, and travel grants to deans and senior faculty members for observation of teaching methods and curriculum planning.

This long-term project is closely related to activities of a number of non-governmental and bi-lateral agencies in the field of professional education. The Medical Education Information Center operated by the Organization has been set up to provide a common basis for these activities to allow ready exchange of information and avoidance of duplication.

Provision is made for consultant services, travel grants, and a limited amount of supplies and equipment.

AMRO-23.5, Fifth Regional Nursing Congress (See page 218)

Since 1949 four congresses have provided an opportunity to nursing leaders of the Continent for discussion of professional problems and ways of meeting them. As an educational process, it has been very fruitful to have these contacts between nurses from countries where the profession is in its initial stages and nurses from countries where it is well developed. The governments have supported these meetings by sending one or more nurses and paying their expenses. It is planned to hold the fifth in this series of congresses in 1959 in South America.

Budgetary provision is made for advisory and conference services and for a limited amount of supplies and equipment.

AMRO-26, Brucellosis Control (See page 218)

Improved diagnosis and increased interest in brucellosis have been stimulated by the PAHO/WHO training courses conducted in 1952, 1954 and 1957, and the follow-up consulting services provided by Zone Veterinary Public Health Advisers and short-term consultants. The previous courses have dealt with antigen production and standardization, diagnostic tests, the prevention and treatment of human brucellosis, and control of animal brucellosis.

Provision is made for short-term consultants in 1959 to continue follow-up services.

AMRO-28, Advanced Nursing Education (See page 218)

Throughout Latin America the pattern of nursing service and the extensive use of often inadequately trained auxiliaries make it imperative that graduate nurses have special training in administration, supervision and education. Unfortunately most nurses who have received their training in Latin American schools in past years have not had attention to those aspects.

The objective of this project is therefore 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 courses.

To date 34 nurses from 15 Latin American countries have been awarded fellowships under this project.

Provision is made for the award of fellowships to nurses for attendance at the course in Chile. Furthermore, in 1960 and 1961 additional fellowships are provided for courses in one or two other countries where similar programs are envisaged.

AMRO-29, Cultural Anthropology (See page 218)

On the basis of a study of the Organization's program at Washington headquarters and in the field, a consultant anthropologist suggested a number of areas where social science and applied anthropology could be of help, particularly in increasing effective utilization of technical staff.

Major points for strengthening services to countries were in the areas of malaria eradication, nutrition, child health, training courses, health organization and community development for health purposes, assistance to schools of public health and medicine.

A full-time anthropologist will advise on selected country programs with particular regard to helping staff overcome socio-cultural obstacles in the programs they are carrying out. He will also assist personnel in charge of training programs to improve both content and method of teaching. Furthermore, assistance will be given to medical schools and schools of public health in social science aspects of their curricula.

Activities of the full-time staff member will be supported by a senior short-term consultant anthropologist and by a selected advisory committee including public health workers experienced in the use of social sciences in public health programs.

AMRO-35, Fellowships (Unspecified) (See page 220)

As a general policy, most fellowships to be financed from the resources available to the Organization are included in the individual projects. This policy favors a more logical program development, since it concentrates on the training of personnel needed immediately for developing the planned activities.

Experience has shown, however, the difficulty of anticipating many of the governments' requirements in the training of basic public health personnel and of specialists needed for developing certain public health programs. Consequently, this project provides a small central fund for meeting urgent requests when they cannot be met within country projects.

With funds so provided, 21 new awards plus extensions to a number of other awards were made in 1958 in a wide variety of subjects, for the training of personnel from most countries of the Continent. A similar program is being carried out in 1959 and others are planned for 1960 and 1961.

AMRO-39, Environmental Sanitation (Advisory Committee and Consultants) (See page 220)

In 1958, an Advisory Committee was convened to review the activities of the PAHO in the field of environmental sanitation. The Committee report laid great stress on importance of water supplies to the peoples of this hemisphere and the need to stimulate work in this field beyond anything previously undertaken.

In the development of this program, particularly its early phases, continued assessment and review are essential. Meetings planned for 1960 and 1961 will assess progress and advise on needed changes and new approaches. Provision is made for consultants and for limited travel of these consultants to certain countries of the Region. In addition, travel is provided for the six Zone engineers to take part in these meetings.

AMRO-45, Laboratory Services (See page 220)

Existence of readily available and reliable laboratory diagnostic services and production and control of biological products are paramount to fully effective work in communicable diseases. The major part of the assistance of the Organization in the expanding efforts of almost every country in the hemisphere to improve or reorganize public health laboratory services is provided through special country projects, or as part of a project concerned with integrated health services. To make initial appraisal consultation, however, intercountry consultants are needed and their visits often result in a country project or the addition of a laboratory adviser to an existing project. Furthermore, experience has shown that urgent situations often arise in national laboratories when particular specialists are needed promptly.

Through this project also assistance is given to laboratories of the various countries by providing cultures, strains, antigens, and other laboratory aids vital to the conduct of diagnostic tests or production of biologics, and breeding stock of laboratory animals.

Short-term consultants, supplies and equipment and fellowships for key personnel of national laboratories are provided.

AMRO-46, Seminar on Nursing Education (See page 220)

For several years seminars or workshops on various phases of nursing education have been held under AMRO-46. Two of the workshops were on principles of teaching and supervision; two were on curriculum planning; and the fifth discussed nursing surveys. Since all the countries which might be undertaking formal surveys within the next few years participated in the workshop in Brazil, 1958, a second workshop on this topic will not be held for some time.

For 1960 and 1961, it is planned to bring together directors of schools of nursing for ten-day conferences on ways of incorporating principles of teaching and supervision in the curriculum without extending the basic course in nursing. Thus, this project is complementary to AMRO-100 and is aimed at avoiding the gaps in training which have occurred in previous years. South American schools of nursing will participate in 1960, and those from Middle America and the Caribbean in 1961.

Provision is made for short-term consultants, for participants, and for some supplies and equipment.

AMRO-48, Seminar on Teaching of Public Health in Schools of Veterinary Medicine (See page 220)

The increased attention given by health authorities to the problems of the zoonoses and of food control has created a demand for full-time public health veterinarians at all levels of public health. To promote and strengthen the interest of veterinarians and their training, it is important to bring together the deans and professors of schools of veterinary medicine in order to discuss suitable ways of incorporating modern teaching of preventive medicine and hygiene into future curricula.

A regional one-week seminar is being held during 1959 for deans and professors of preventive medicine from the schools of veterinary medicine of Argentina, Brazil, Canada, Chile, Colombia, Cuba, Ecuador, Guatemala, Mexico, Peru, Uruguay, the United States, and Venezuela. Short-term consultants are assisting in the conduct of the seminar. During 1956, 1957, and 1958 short-term consultants under project AMRO-67 visited many of the schools and laid much of the groundwork for the seminar.

Provision is made in 1959 for short-term consultants, for participants, and for supplies and equipment.

AMRO-57, Yellow Fever Studies (See page 220)

Enzootic yellow fever virus cannot be eradicated from its tropical rain-forest preserves with any procedure now known. To vaccinate all exposed rural populations a better method of applying 17D vaccine is needed, one that can be used in a house-to-house fashion. There is hope that this can be done by the scarification technique as used for smallpox vaccine, and possibly administered simultaneously into the latter.

Epidemiological studies of yellow fever, particularly to define the precise nature and composition of the extra-human reservoir, involve a variety of laboratory procedures, such as: the isolation of virus from man, from monkeys and other warm-blooded forest vertebrates, and from mosquitoes and other blood-sucking arthropods; serologic studies of man, monkeys, and other vertebrates, histopathologic studies in human and monkey; and taxonomic and distributional studies of mosquitoes. All these need coordination with ecological aspects.

In past years main reliance has been placed for laboratories procedures on the Carlos Finlay Institute in Bogota (Colombia-52). There has also been close cooperation with the Gorgas Memorial Laboratory in Panama and the Rockefeller Foundation Virus Laboratories in New York. It is expected that additional laboratories will be brought into the program.

Two subjects receiving special attention are: (1) development of procedures that will make 17D yellow fever vaccine 100 per cent effective when it is applied by scarification, (2) the possible role in the epidemiology of jungle yellow fever of Culex mosquitoes that never, for all practical purposes, bite man.

Provision is made in 1960 and 1961 for short-term consultants and for grants to laboratories that cooperate in the studies, so that they may undertake the special work that is required.

AMRO-60, Smallpox Eradication (See page 220)

Smallpox is still an important public health problem in the Americas. Although in some countries the disease has been eradicated or reduced substantially, in others it continues to be a subject of serious concern.

Recognizing the extent of the problem, the Governing Bodies of the PAHO recommended that Member Governments undertake systematic programs of smallpox vaccination and re-vaccination in their respective countries with the aim of eradicating the disease from all parts of the Western Hemisphere.

In accordance with the resolutions adopted by its Governing Bodies, PAHO is carrying out a program designed to stimulate the efforts of the individual countries of the Americas and to cooperate with them in planning smallpox eradication projects through the organization of vaccination campaigns to be incorporated subsequently in the permanent health services of the countries, as a means of eradicating this disease in the Western Hemisphere.

As the first phase of this program, PAHO/WHO is promoting the production in the various countries of high quality smallpox vaccine capable of withstanding the effects of the difficult field conditions found in large areas of the continent where facilities for transportation and refrigeration are scarce. For this purpose various national Laboratories (Argentina, Bolivia, Brazil, Chile, Colombia, Cuba, Ecuador, Mexico, Peru, Paraguay, and Venezuela) were provided with the equipment necessary to produce dried smallpox vaccine. At the same time, the services of a consultant specialized in the production of dried smallpox vaccine have been provided, technical information on the subject has been distributed, fellowships have been awarded to national personnel for training in modern vaccine production methods, and the services of an internationally recognized laboratory have been made available for testing the purity and potency of the vaccine produced by the national laboratories.

The Organization has also collaborated with various governments in the planning and development of vaccination campaigns, either by providing the services of specialized consultants (Argentina, Colombia, Cuba, Ecuador, Haiti, Paraguay and Uruguay), by awarding fellowships for the training of national personnel, or by supplying equipment.

During 1959, 1960 and 1961, similar cooperation will be extended to other interested countries. The

assistance to individual countries is shown as units of this project under the respective countries.

Provision is made for the services of a short-term consultant in the preparation of dry smallpox vaccine, testing of the vaccine in the Serum Institute, Copenhagen. Provision is also made for a seminar on organization of smallpox eradication campaigns and methods for maintaining eradication to be held in 1961.

AMRO-61, Rabies Control (See page 222)

One of the principal methods of preventing human infection is control and eradication of rabies in animals, particularly the dog. Services are provided to assist countries in the planning of animal rabies control programs and in the manufacture and testing of vaccines for use in animals. In addition, similar advice is provided for human vaccine and for hyper-immune serum.

A most difficult problem in anti-rabies programs is the existence of the disease in wildlife, including bats. Demonstrations are provided in wildlife control techniques and studies in bat rabies are assisted. For the latter, a grant to the Institute of Biology, University of Mexico, is planned in 1961.

Provision is made for short-term consultants and limited amounts of supplies and equipment deemed vital to continuance of national programs and not readily available in the countries.

AMRO-63, Assistance to Schools of Nursing (See page 222)

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 for observation of teaching methods, of demonstration programs, and of new trends in curriculum planning; and opportunities for senior members of nursing faculties in the United States and Canada to visit countries in Latin America from which their students come, so that they may be in a better position to adapt the teaching and field programs arranged for the fellows to the type of health organization and general conditions of those countries.

Provision is made for short-term consultants and fellowships in 1961.

AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine (See page 222)

Increasing interest in the zoonoses and food hygiene has led to the extension or establishment of veterinary public health activities in national ministries of health throughout the Americas. There is a dearth of properly trained personnel for this work yet inadequate attention is given to preventive and public health aspects in most schools of veterinary medicine.

One approach to the problem has been the holding of a Seminar on Teaching Public Health in Schools of Veterinary Medicine to be conducted in 1959 on a region-wide basis under project AMRO-48.

To provide direct advice to individual schools this project is designed to strengthen the teaching of

epidemo-epizootiology, veterinary hygiene, and preventive medicine through provision of short-term consultants and fellowships.

AMRO-72, Dental Health (See page 222)

Many countries in the Region are now developing or expanding dental public health services. There is a growing need for adequately trained public health dentists to operate these services efficiently.

A Regional Adviser in Dental Health has been making surveys and providing advice to governments on the development of dental health services. The work of this consultant was started with a Kellogg Foundation grant and has continued under this regional project.

A further objective of this project is to assist governments in the training of public health dentists by providing fellowships for participation in specialized courses at the dental health training center which has been established in Brazil in 1959 (Brazil-37), in which program the Regional Adviser is also collaborating.

Provision is made for one dental officer and for fellowships.

AMRO-74, Plague Investigation (See page 222)

In recent years plague has been reported from rural areas of Argentina, Bolivia, Brazil, Ecuador, Peru, United States, and Venezuela, in all of which countries it is enzootic among wild rodents, thereby representing a constant threat to the domestic murine population and to man.

The Organization has been cooperating in antiplague campaigns and epidemiological studies in several countries. More recently the Organization has provided the services of a consultant to carry out studies on the ecology of rodents, and their fleas, prevalent in the endemic areas of Bolivia, Brazil, Ecuador, Peru, and Venezuela.

To improve the training of personnel responsible for the national antiplague services, it is proposed to hold a training course on epidemiology and control.

In 1961 funds are provided for two consultants, attendance of participants (from Argentina, Bolivia, Brazil, Ecuador, Peru and Venezuela) and a limited amount of supplies and equipment.

AMRO-76, Vaccine Testing (See page 222)

In order to assist vaccine-producing laboratories to maintain the high standards of potency and safety that vaccines require, testing services of proven quality for the control of such biological products have been obtained from FAHO/WHO reference laboratories. An annual grant is made to one of these laboratories where the majority of the testing is done.

AMRO-77, Pan American Foot-and-Mouth Disease Center (See page 224)

Foot-and-mouth disease (Spanish and Portuguese: aftosa) is a disease of livestock which is highly infectious and causes serious economic losses particularly in the cattle raising countries of South America which are, for the most part, seriously affected. The only way to overcome this waste is to eradicate the disease. Furthermore, the countries of Central and North America are free of the

disease and the only permanent protection is to eliminate possible sources of infection.

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. In addition, the Host Government of Brazil provides land and building, and funds for utilities and some local labor.

The Center trains field and laboratory people working on aftosa; provides diagnostic and virus-typing services; advises on prevention, diagnosis, control and eradication of aftosa 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 aftosa, in improvement of methods of diagnosis and virus typing, in making epizootiological studies, and in making basic studies on other vesicular diseases.

From 1953 through 1958, the Center has conducted a number of courses and seminars of periods up to two months, which were dedicated to various specific problems or to general laboratory work. Of the trainees who attended, 119 were at the Center's expense and 81 were at the expense of their own countries. More highly specialized, long-term training has been given to limited numbers of fellows, four at the Center's expense and four at their countries' expense.

Research activities are yielding results of practical value in the selection of virus strains for vaccine preparation. A collection of strains is now available to vaccine production laboratories. A good possibility now exists for development of a modified live virus vaccine against aftosa. The Center has one strain of type O in a suitable stage of modification and work is in progress to obtain similar strains of types A and C. This investigation is being given the highest priority. In the meantime, consultation and assistance to country programs is being given to the fullest extent possible.

In 1959 the Committee of 21 of OAS recommended expanding and intensifying the activities of the Center, particularly with reference to vaccine development and also in services to countries and in training. During 1960 and 1961 the Center proposes to continue its program and services, expanding as available funds will permit.

The Technical Cooperation Program of OAS finances this entire program. Estimated requirements for 1960 and 1961 are for 108 employees. Other expenses for operating the Center have been included in the proposed program and budget.

AMRO-81, Pan American Zoonoses Center (See page 226)

During 1958, the second year of its operation, the Pan American Zoonoses Center reached a stage of development that enabled it to satisfy a growing number of widely varying requests. They ranged from education and training to consultations, coordination, laboratory services, field demonstration, special research and studies, and information. Special attention was given to certain zoonoses considered of greatest importance for their socio-economic effects: brucellosis, hydatidosis, rabies, and tuberculosis. There were also some activities in other zoonoses that are problems in many countries in the Americas, as, for example, leptospirosis and trichinosis.

The program, past and present, was reviewed and evaluated by a technical advisory team on zoonoses for the Americas, which met at the Center in November. Before meeting in Azul, the five members of the group visited several American countries to determine their zoonotic problems and the desires of the government authorities in connection therewith. Its report and recommendations constitute a valuable guide for the development of the Center. The technical advisory team on zoonoses was financed by a grant from the Rockefeller Foundation to the Pan American Sanitary Bureau.

The program for 1959 began with the special annual course for advanced training in zoonoses, held in January. Also planned for 1959 were two other courses on zoonoses control and a seminar on bovine tuberculosis. In January the first long-term (12 months) fellow was received, and preparations have been made for the arrival of three more during the year. The field demonstration and evaluation studies, which began in 1958, will be continued with the use of special vaccines in the control of caprine brucellosis, bovine rabies, and leptospirosis. The field evaluation of Sterne vaccine for the control of anthrax will be started.

The training activities in 1960 will begin with the special annual advanced course in zoonoses and it is hoped to include also a course on diagnosis and control methods for leptospirosis, another on measures for controlling anthrax (including vaccine production), and a seminar on the eradication of rabies. It is expected that four long-term (12 months) fellows will be admitted.

Funds were requested of the OAS to carry out a training course in zoonoses for field auxiliary workers in 1960. This course, which will last one month, would be attended by approximately 20 fellows, one from each of the American countries.

Funds were also requested of the OAS to cover at the beginning of 1960 the post of one technical education officer, in order to expand and strengthen the technical-education services of the Center.

The international staff of the Center consists of four members. The local non-professional personnel provided from the special funds contributed by the Government of Argentina increased from 12 to 22 during 1958, including laboratory aides and semiskilled and unskilled workers. The operating expenses of the Center will be met by contributions from all the entities participating in this program.

AMRO-85, Latin American Center for Classification of Diseases (See page 226)

The Latin American Center for Classification of Diseases was established in 1955, in collaboration with the Government of Venezuela, to serve as a clearinghouse for problems arising in the application of the Spanish edition of the Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death; to collect information and experience that can be utilized in subsequent revisions of the Classification; to check coding of samples submitted by countries and interpret the Classification for Latin American countries in order to improve comparability of coding; and to study problems of medical certification with a view to improving this type of work.

The Center provides instruction in the use of the Classification and conducts annual short training courses in statistical coding. Two-week courses were held in 1955,

1956 and 1958 which provided training to 38 officials from 15 countries engaged in coding activities, as well as a seminar in 1957 for 19 participants.

To assist the Center in these activities and provide the services of a statistician, financial assistance is given the Center in the form of a grant. Provision is also made for short-term fellowships.

AMRO-88, *Aedes aegypti* Eradication (See page 228)

In compliance with the mandate of its governing bodies, the Organization has since 1947 been devoting concentrated efforts toward eradicating *A. aegypti* from the Western Hemisphere. Expert technical advice has been given to almost every government, and a number of eradication projects are in operation. The results of this campaign to date have been very rewarding. The vector mosquito has been eliminated from large areas and very greatly reduced in a number of other areas.

The XV Pan American Sanitary Conference declared the following countries and territories free of *A. aegypti* infestation: Bolivia, Belice, Brazil, Canal Zone, Ecuador, French Guiana, Nicaragua, Panama, Paraguay, Peru, and Uruguay.

Final verification has been completed in Guatemala, El Salvador, and Honduras, and will be undertaken in 1959 in Costa Rica. The campaign is in its final phase in Colombia and is advanced in Argentina and Venezuela. In general, the situation may be regarded as completely satisfactory in Central and South America. One of the chief remaining problem areas is the Caribbean, mainly the Greater Antilles, where infestation is widely prevalent.

The extent of the problem in the southern part of the United States, where there are infested areas, is still unknown.

Therefore, provision is made for the services of a medical officer, short-term consultants, supplies and equipment.

AMRO-90, Malaria Technical Advisory Services (Regional) (See page 228)

The purpose of this project, which was established originally in 1955 as COMEP and modified in 1957 with the transfer of personnel to Washington headquarters and the establishment of the Malaria Eradication office there, is to provide consultants to give technical advice and assistance to Member Governments in several specialties as applied to malaria eradication, i.e., entomology, parasitology, and vehicle and management maintenance. For greater flexibility and economy, the field group will be based, except as otherwise noted, in Bogota, Colombia.

An entomologist is included to provide advice and assistance on entomological problems, including determination of vectors and ecology; development of techniques for determining susceptibility of vectors to insecticides; development of techniques for determining and measuring resistance of vectors to insecticides; preparation of guides and manuals for field programs; over-all coordination of field programs relating to entomology in malaria eradication; and assistance in teaching wherever requested.

A parasitologist is provided to advise on laboratory procedures, including equipment and supplies; to standardize diagnostic techniques in malaria eradication; to

to furnish manuals of procedures; and to perform such teaching duties as may be required.

A management and vehicle maintenance consultant (administrative officer) is concerned solely with the specialized problems involved in the efficient and economical management of large fleets of motor vehicles, and works closely with a similar consultant now on the staff of UNICEF.

Eight additional technical positions (two medical officers, two sanitary engineers, and four sanitarians) are provided in order to establish a pool of qualified personnel to meet a variety of requests. From time to time additional personnel will be required to strengthen the consultative services to certain projects, particularly the larger ones. Substitute services will also be required to cover periods of home leave or illness of project staff members.

Provision is made for two medical officers, one entomologist, one parasitologist, two sanitary engineers, one administrative officer, four sanitarians, and a secretary. Provision is also made for supplies and equipment and for common services.

AMRO-92, Poliomyelitis (See page 228)

Concomitant with improvement in general environmental and sanitary conditions, possibilities for natural exposure and consequent immunity to poliomyelitis decrease and clinical disease becomes more evident. The problem may thus be expected to increase in the Americas.

Attack on the disease requires a multiple approach—direct through vaccination, indirect through improved laboratory diagnosis and epidemiological studies and through treatment and rehabilitation services.

In regions of the world with poor standards of hygiene, exposure to the poliomyelitis viruses and the consequent development of antibodies occur almost universally and at an earlier age than in areas where these standards are higher. Infant mortality rates have been found to be a good index of the degree and quality of general sanitation and public health services of a given population; it has been observed that where the rates decrease below 80 per 1,000 live births, poliomyelitis outbreaks begin to occur and are particularly severe when the rate falls below 40. Additional support to this observation was given in 1957 by British Guiana, where the first recorded outbreak of paralytic poliomyelitis occurred when steadily decreasing infant mortality rates reached 70 per 1,000 live births. Similar paralytic outbreaks and epidemics have been increasingly frequent in the last years in several of the countries of the Region; in 1958 they were reported from Colombia, Nicaragua, Haiti and Brazil.

Vaccination with an adequate and practical vaccine is still the only effective means of controlling the disease. The development of inactivated (Salk) vaccine constituted an important step in that direction. Technical complications in manufacture and use of this vaccine, as well as its expense, have stimulated search for better types of immunizing agents against the disease.

During 1958 the Pan American Health Organization collaborated in several countries in the Region in large scale field studies of a live attenuated poliovirus vaccine which carried the promise of obviating the above drawbacks (see AMRO-181).

A course on laboratory diagnosis of viral diseases was given in January 1958 in Mexico City, with the attendance of 11 fellows from the Region.

The second course on laboratory aspects of poliomyelitis and vaccine production was held in October with eight fellows attending from the American, European, African and Eastern Mediterranean Regions.

A course on tissue culture techniques as applied to virology will be offered for qualified virologists in 1959 and 1960 at the Tissue Culture Laboratory in Cali, Colombia.

This project provides for a medical officer, consultant services in the fields of virology and rehabilitation, fellowships for training in the field of virology, as related to poliomyelitis and in different aspects of rehabilitation, laboratory courses on tissue culture techniques as applied to virology and to the diagnosis and epidemiological studies and control of polio, and supplies and equipment.

AMRO-94, Diarrheal Diseases in Childhood (See page 228)

Diarrheal diseases are among the principal causes of death in almost all the Latin American countries and are the leading cause in nine countries, affecting especially children under five years of age. In eight countries in 1952, the infant death rates from diarrheal diseases were ten times higher than the lowest recorded country rate in the Americas. The contrast was even sharper for the age group 1-4 years; in these countries the death rates were 150 times higher than the lowest rate. Furthermore, the excessively high levels of illness from diarrheal diseases impose a heavy burden on the limited financial and professional resources of the health services.

To achieve a substantial reduction in mortality and morbidity due to diarrheal diseases, there are two specific measures which can be applied on a mass scale, namely; making water available in homes for personal cleanliness, and prevention and early treatment of severe dehydration, which is the lethal factor in the disease.

Another important step is further elucidation of the complex etiology of these diseases, with particular reference to their relation to malnutrition.

The Organization therefore proposes to collaborate with interested governments in the development and evaluation of increasing the availability of water in selected communities where diseases have high incidence; and in promoting early oral rehydration, making full use of the services of auxiliary health workers, as a simple life-saving measure in areas lacking adequate medical care facilities. Furthermore emphasis will be placed, in the integrated health projects, on the phases of environmental sanitation and maternal and child health which are directly related to prevention of diarrheal disease. Using the facilities available at INCAP, studies will be carried out to ascertain the epidemiological distribution of etiologic agents and the relation of diarrheal diseases to nutritional deficiencies, particularly in children under five years.

A team of special consultants will assist in these programs, which will be focused continuously on practical applications. These consultants will be available for collaboration with all interested governments.

Provision is made for a bacteriologist, a statistician, a public health nurse in 1959. Short-term

consultants are provided for in all three years. Provision is also made for a limited amount of supplies and equipment.

AMRO-98, Working Group on Medical Certification
(See page 230)

A working group of 18 persons was brought together for a week in Venezuela, at the Latin American Center for Classification of Diseases, in order to make a complete review of education and training in medical certification during medical studies and to prepare a teaching manual that will be made available to medical schools. The group included professors of preventive medicine, health officials having a special interest in the teaching of medical statistics and medical certification, leaders in vital statistics in Latin America, and a few consultants.

AMRO-100, Courses on Nursing Supervision and Administration
(See page 230)

Many nurses in Latin America are placed immediately upon graduation into positions of teaching and supervision even though they have been prepared only to give direct care to the patient. As a result, except for a limited number of nurses in each country who have had further study, the personnel holding such positions are not really trained for their principal functions, i.e., training and supervising auxiliary nursing personnel.

In none of the countries will there be enough graduate nurses for several decades to fill all the needs in actual patient and family care. With regard to public health nursing, in a group of 10 countries the population per public health nurse varied from 110,400 to 763,700. It is of the utmost importance, therefore, that the graduate nurses who are already available be prepared to train auxiliary nursing personnel and to supervise and administer their work.

To assist in filling this need, it is proposed to establish four-month courses in nursing supervision and administration, to be held in suitable cities in 1960 and 1961 as in 1959. Approximately 20 graduate nurses would be invited to attend from several countries.

Provision is made for short-term advisers and for some supplies and equipment.

AMRO-102, Pediatric Education (See page 230)

Since a higher proportion of the population in Middle and South America is in the younger age groups and these age groups contribute excessively to the mortality rate, preparation of physicians in pediatrics is of particular importance. In 1955, a survey of pediatric education in this area was made on the lines of previous surveys in other parts of the world. Analysis of the results of the survey indicates great disparity among the schools with many obvious weaknesses.

Furthermore UNICEF proposes to aid the development of pediatric education through assistance to selected schools for the establishment of a full-time pediatric department and for improvement of teaching facilities.

This project, thus, has two aims. The first is to bring together representatives of the schools to analyze their pediatric teaching programs in the light of WHO and other recommendations and taking into consideration the findings of the survey. Such meetings would be held individually for the larger countries and on an intercountry basis for small groups of neighboring countries that have

only one school or a limited number of them. It is expected that the professor and one or two members of the staff from each pediatric department would attend, together with the dean and selected professors in related fields particularly preventive medicine and obstetrics. The first of these meetings was held in 1958 in Paipa, Colombia, for the ten medical schools in Colombia and Venezuela.

The second aim is in connection with development of any UNICEF-aided project in pediatric education for the Organization to provide the visiting professors to advise on the organization of teaching and research in pediatrics, as well as fellowships for the national staff.

Provision for short-term consultants, as well as for conference services, fellowships participants, and some supplies and equipment is being made in 1961.

AMRO-106, Seminar on Public Health Administration
(See page 230)

In recent years many countries have reorganized their national health services and are expanding their local health services, with the assistance of the Organization. In this process of reorganization and expansion, various problems have arisen with regard to the functions of the various organizational units of the national services as well as their coordination, the process of decentralization, and the relationship between national and local health services.

A series of seminars will be held to provide opportunities for exchange of experience and information by public health teams from the various countries. Among the topics to be discussed will be planning, in terms of health priorities; decentralization of services to intermediate and local levels; and relationships between these organizational entities. The functions of the various team members will be redefined and clarified, as will the working relationships between the various team members and between the public health team and other community agencies. Methods for preparing personnel in terms of activities to be performed will be studied.

These seminars will be attended by public health officers, engineers, nurses, and selected workers in other public health professions. It is expected that professionals from both national health services and local health demonstration areas will attend, so as to permit a useful interchange of ideas on the problems at both levels.

A first seminar will be held in 1961 in Panama for participants from Costa Rica, Ecuador, El Salvador, Guatemala, Honduras, Panama, and Paraguay. A second seminar is planned for 1962 in Argentina for participants from Argentina, Brazil, Colombia, Mexico, Peru, Uruguay, and Venezuela.

Provision is made for participants, consultants and conference costs in 1961.

AMRO-110, Tuberculosis Prevention (See page 230)

The full and precise extent of the tuberculosis problem in the Americas, as a whole, is not known. However, such data as are available provide enough information to designate tuberculosis as an important public health problem in Latin America.

The introduction of treatment with drugs such as streptomycin, PAS, and particularly isoniazide, has changed completely the public health approach to the tuberculosis

problem. Chemotherapy increases the life expectancy of patients with pulmonary tuberculosis and renders most non-infectious.

The possibility of large-scale application of chemotherapy and chemoprophylaxis on an ambulatory or domiciliary basis is leading to a great reduction of the need for isolation of patients in hospital beds. This means a reduction in the cost of tuberculosis programs, making it economically possible to extend them on a nation-wide scale to countries up to now unable to afford the high costs of extended hospital construction and maintenance.

In the last few years the collaboration of the Organization has been devoted mostly to mass BCG vaccination projects. These efforts will be continued where needed, but it is becoming increasingly necessary to expand the activities towards other fields, such as ambulatory and domiciliary chemotherapy and chemoprophylaxis, which offer great possibilities as public health measures against tuberculosis.

The purpose of this project is to collaborate with Governments in utilizing the new developments for an active program for the prevention of tuberculosis, through: training of national personnel in the new techniques and procedures for the management of the tuberculosis problems; survey of the tuberculosis situation in the different countries in order to gain more accurate and complete information regarding the extent and nature of the problem in the different population groups, as well as of the available resources in the countries; and field trials of mass administration of isoniazide since there is a definite possibility that appropriate dosages for sufficient time can minimize the transmission of the disease and the development of new cases. In order to study the possibilities of this mass technique of tuberculosis prevention, it is proposed to conduct a study in which the problems of chemotherapy and chemoprophylaxis would be investigated on a community basis.

To implement the above outlined program, provision is made for an advisory team consisting of a medical officer, statistician, public health nurse, X-ray technician, and laboratory technician. Provision is also made for consultants and for participants to seminars.

AMRO-112, Fundamental Education Training Center (CREFAL)
(See page 232)

The Latin American Fundamental Education Training Center, CREFAL (Centro Regional de Educacion Fundamental para la America Latina), was established in 1951 at Patscuaro, Michoacan, Mexico, by agreements between the Government of Mexico, UNESCO, and the Organization of American States and in collaboration with the UN, ILO, and FAO. These agencies have assigned technical staff to the Center to give the students special training or experience in the basic skills required, such as agricultural extension, literacy teaching handicrafts, etc. Students from virtually every country of the Americas are received each year for a 19-month course in fundamental education methods. These are applied to basic needs of rural Latin American communities to promote their socio-economic development.

At present the Organization participates in the recently created Interagency Advisory Committee to CREFAL, which serves as an advisory body in matters of operation, budget, and general curriculum planning. The Organization also cooperates through technical consultant services.

It is now proposed that a sanitarian be assigned to work with other staff and with students in the development of community activities directed toward improving environmental sanitation, such as well-drilling and protection, latrine construction and installation, waste disposal, market sanitation, etc.

In 1961 short courses in environmental sanitation will be organized for fundamental education personnel in whose previous training this important aspect of community services may not have been sufficiently stressed.

Provision is made for a sanitarian and short-term consultants.

AMRO-122, Research and Development of Insecticide Application Equipment (See page 232)

It is proposed to make field tests of improved equipment for the application of insecticides. At present high pressure pumps are in use. The rebound of the insecticide represents a considerable loss of material which falls on the floor and on the sprayman, constituting a hazard to his health. In addition the rapid reduction of the pressure within the spray can makes an uneven distribution of the toxicant on the walls. Research will help correct these defects promptly.

Provision is made in 1960 for purchase of specialized equipment to ascertain their effectiveness and to determine their usefulness in malaria eradication programs and for short-term consultants.

AMRO-123, Research and Development - Protective Equipment Against Toxic Insecticides (See page 232)

In addition to the well known toxic effects of dieldrin and the hazard which it represents to the sprayman, other insecticides which may be more toxic are required due to the problem of resistance of some malaria mosquito vectors to insecticides. This necessitates adaptation of protective equipment now in use or the development of new equipment to meet the problems encountered in warm and tropical climates. This project will be conducted in 1960 under a grant from PAHO, either by a recognized research laboratory or by a national malaria eradication service.

AMRO-125, Seminar on Malaria Eradication Evaluation Techniques (See page 232)

Evaluation of the operations of any malaria eradication program must be carried out during all phases of the programs and must follow a procedure different from the conventional malariometric methods. In fact, it has to give the final answer as to whether transmission has been interrupted after the sprayings or whether new malaria cases are still being found. In the latter case the causes for persistent transmission must be investigated.

In 1959 a seminar to deal with the question of evaluation techniques used in malaria eradication programs is planned. National officials in charge of these activities and international consultants will attend this meeting. Provision is made for participants and for supplies and equipment in 1959.

AMRO-130, Seminar on Mass Chemoprophylaxis and Surveillance Techniques in Malaria Eradication (See page 232)

During 1959 mass chemoprophylaxis in malaria eradication programs is being developed. In Brazil a plan has been developed for the distribution of chloroquinized salt in the Amazon Valley area. In British Guiana a similar

project is in the planning stage but using pyrimethamine instead of chloroquine. In Venezuela the Government is operating a large scale program of mass treatment through the administration of pyrimethamine in house-to-house visits. Finally in some other countries drugs are being administered to the population in house-to-house visits in areas where the malaria vectors were resistant to the available insecticides in order to keep the prevalence of the disease as low as possible until other negatively correlated insecticides can be used.

Otherwise, in certain areas of several countries, malaria is almost at vanishing point. These countries are requesting, therefore, that surveillance techniques be instituted at the suspension of spray operation.

It is advisable that a seminar be held for exchange of experiences in both fields.

Provision is made for this seminar to be held during 1960. Participants, consultants, supplies and supporting services are budgeted.

AMRO-132, Operational Assistance to Country Projects in Malaria Eradication (See page 232)

It is anticipated that the requirements of the hemisphere-wide malaria eradication campaign will include operational assistance by the Organization to certain country projects, upon request. This operational assistance will be based upon the nature of specific requests from governments, and it is anticipated that it will include such items as: financing of a percentage of national posts; assumption of more than an advisory role in the execution of the national campaign; and provision of certain supply and equipment items not normally furnished by international agencies.

Provision is made for such assistance in 1959, 1960 and 1961.

AMRO-135, Malaria Eradication Trainees (See page 232)

Owing to the shortage of experienced workers in malaria eradication in the Americas, the Organization has been forced to train its staff members in malaria eradication techniques in order to carry out its function of providing technical advisory services in this field. During 1957, nine physicians, nine engineers and ten sanitarians were trained; three physicians, four engineers and 26 sanitarians received training in 1958 and during 1959 it is expected that four physicians, three engineers and 13 sanitarians will follow the training courses. By the end of 1959 it is expected that the field staffing pattern of the Organization will have been completed. Provision for trainees in 1960 and 1961 is limited to the number that might be required from normal turnover of technical staff.

AMRO-138, Studies on Malaria Chemotherapy (See page 234)

Early in World War II it was found that 300 mg (base) of chloroquine, when administered weekly, produced complete suppression of all species of malaria parasites, but no attempts to determine the minimum effective suppression dose were made. In the light of present knowledge on the amount of chloroquine required to alleviate an acute attack of the disease, half of 300 mg, or even less, may produce complete suppression and thereby prevent transmission. In planning any kind of malaria program which involved the incorporation of antimalarial drugs in salt, this matter is of extreme importance in terms of cost alone.

Initial studies on the "depotting" of antimalarial drug (i.e., maintaining a high level of drugs in the blood for a long period of time as is done by monoesterate-penicillin) are promising. These studies must be undertaken both in laboratories and by making controlled checks on a number of volunteers over long periods. It is hoped to develop a method of "depotting" which will be effective for six months or more.

To date, all studies on primaquine have been directed toward determining its curative effect against the tissue forms of the parasite. Plasmodium, the first of the 8-aminoquinolines, had pronounced effect against all gametocytes. In terms of malaria eradication, where the discontinuance of transmission is of the utmost importance, the effect and optimum dosage of this new 8-aminoquinoline on gametocytes of both *Plasmodium falciparum* and *P. vivax*, should be known.

It is proposed to provide grants in 1959 for studies on the above points by responsible institutions.

AMRO-142, Health Aspects of Nuclear Energy (See page 234)

Possibilities of nuclear energy as a cheap source of energy for multiple purposes and as a valuable tool in medical research, diagnosis, and therapy carry also hazards of misuse which may outweigh the gains derived. Several countries of the Hemisphere have already begun to use fissionable materials. In addition to opportunities for stimulating and guiding proper medical usage of ionizing radiation this new massive source of radiation emphasizes the need of establishing safety standards for all sources, including X-rays, which have not heretofore been subjected to careful control.

Under the present project the Organization will assist in two major fields: (a) use of radioisotopes for medical research, diagnosis, and therapy; and (b) development of procedures and standard regulations for radiation protection, in both the use of isotopes and other radiation sources and in the disposal of radioactive waste from power reactors and other sources.

It is proposed to award fellowships for the training of national radiological officers for service with the health departments.

Provision is also made under this project for the use of short-term specialists to advise and assist governments in the development of safety programs for the application of radiation protection procedures, including atomic waste disposal. They would also advise on the drafting of health regulations and laws to provide administrative and legal bases for carrying out protective measures.

Provision is made for short-term consultants and fellowships.

AMRO-149, Leprosy Control (See page 234)

Before extensive control measures against leprosy can be planned, it is essential to know, as accurately as possible, the extent and characteristics of the problem.

In 1951, the services of a consultant were provided by the Organization to make a survey in Bolivia, Colombia, Ecuador, Paraguay, and Peru. In 1955, similar surveys were carried out in Surinam and Trinidad; in 1956, in British Guiana, French Guiana, Grenada, Guadeloupe, Martinique, and St. Lucia; in 1958, in Jamaica, Costa Rica, Argentina, and Uruguay. It is expected that in 1959 the survey will

be completed in the other countries and territories of the Region. As a result of these surveys, individual control programs have been outlined, and preparation for their implementation are in some cases under way with international cooperation from the Organization and UNICEF.

In order to promote the exchange of ideas and experience among professionals throughout the Hemisphere, a Seminar was held in Belo Horizonte, Brazil, in July 1958. Participants from ten countries and from six territories of the Caribbean area attended the meeting.

For 1960 and 1961 provision is made for short-term consultants and fellowships for training of personnel of national leprosy services.

AMRO-150, Food and Drug Services (See page 234)

In most countries of the Americas, the services for the testing, control, and registration of manufactured foods and therapeutic substances are in need of reorganization and revision. Most of the existing legislation is inadequate and outdated. Registration varies from a perfunctory review of applications and issuance of licenses, to a long and time-consuming procedure for submission of information and samples and payment of fees. The permits issued do not always guarantee to the consumer that adequate safety and potency testing has been done and, once licensed, the drugs are not always subject to retesting of samples gathered in the field.

Revision and improvement can be done effectively only after a study of the needs of the country and the preparation of plans for the drafting or revision of legislation and for the improved organization and administration of the food and drug control services.

In 1960 a survey will be made of present status country by country. On a limited scale, duplicate samples will be sent to reference laboratories to appraise national testing and the present quality of foods and drugs.

In 1960-1961 national laboratories or services will be assisted in accordance with the needs revealed by the survey. Fellowships will be provided for the training of national personnel in laboratory and inspection aspects of food and drug control.

Provision is made for two consultants, for fellowships, and for supplies, equipment, and contractual services for the survey.

AMRO-152, Conference of Directors of Schools of Public Health (See page 234)

There are three schools in Latin America which provide professional training in public health and which receive international students. In several other countries, there are schools for the training of nationals.

Faculty members from all these schools have experienced similar difficulties and problems in developing their programs. They have repeatedly expressed the desire to meet together in order to profit from one another's experience and practice.

To meet this need, a meeting of directors and key faculty members of schools of public health in Latin America was planned for 1959 and another is proposed for 1961. Several participants from each school would attend. The preparations for this meeting, including visits to the schools to discuss the agenda and general organization of

the conference, will be made by short-term consultants and staff members of the Organization. Materials needed for the conduct of the meetings will also be provided.

AMRO-155, Schistosomiasis Control (See page 234)

In the Americas, schistosomiasis is a serious problem in Brazil, Puerto Rico, Venezuela, and exists also in the Dominican Republic and Surinam. Extension of irrigation projects and concentration of human populations is increasing its distribution and its intensity.

This project makes provision for specialized consultants to assist in determining: (a) the incidence of infection and location of infected areas; (b) the number and distribution of the incriminated snails; (c) the flow of water and the amount of vegetation in the land waters involved; (d) the customs of the population in relation to the incidence of the disease and distribution of the snails; and (e) the type and amount of molluscicide treatment most suitable for the various infested areas.

Provision is made for three consultant months each in 1960 and 1961.

AMRO-156, Latin American Training Program in Hospital Statistics (See page 236)

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 by these services in order to develop an efficient hospital program.

In Latin America facilities for the training of personnel to handle these records in hospitals are sharply limited.

It is proposed to assign a medical records librarian beginning in 1960, to work in a hospital that has sufficient staff and satisfactory procedures for use in a training program. A training course of six months would be established and fellowships would be awarded for attendance at the first course in 1961.

In 1961 a hospital statistics consultant will be added to give advisory services to selected hospitals.

Provision is made in 1960 and 1961 for one medical records librarian, one hospital statistics consultant beginning in 1961, and some supplies and equipment. Funds for fellowships are proposed for 1961.

AMRO-158, Mental Health (See page 236)

The approach to mental health and the development of mental health services have undergone profound changes in the last decade, as the result of improved knowledge of preventive methods, gained through studies in the behavioral sciences and the discovery of new therapy.

At the present time there is a need for assessing the comparative importance of the mental health problem in the countries of Latin America and for providing advice in the development of services oriented toward prevention. Related problems, such as alcoholism, also require attention.

It is therefore proposed to assign an expert in mental health to survey and prepare a report on the

existing conditions together with recommendations for the development of a regional mental health program as a basis for assistance to the countries of the Americas.

Provision is made for a medical officer and contractual services in 1960 and 1961.

AMRO-160, Treponematoses Eradication (See page 236)

Eradication of yaws from the Americas ranks high on the list of priorities established by the governing bodies of the Organization, but if it is to be permanent, it must be achieved in all countries where the disease is present.

One of the results of the seminar on treponematoses held in Haiti in 1956, under the auspices of the Government of that country and the Organization, was a better knowledge of the distribution and importance of yaws in different countries. Emphasis was made on the feasibility of, and need for, the eradication of this disease.

It is expected that by 1959 the yaws eradication program in Haiti (Haiti-1) will have reached its final stage, that the Caribbean program (AMRO-47) will be in full development, covering all areas affected by this problem, and that the Dominican Republic-52 project will be advanced. At least some of these projects will require evaluation, and the services of short-term consultants will be needed for this purpose. Consultants will also visit other countries which, as part of the regional program of treponematoses eradication, will either start eradication programs or convert from control to eradication.

Provision is made in 1959, 1960 and 1961 for short-term consultants.

AMRO-165, Nutrition Advisory Service (Interzone) (See page 236)

Great interest in nutrition problems has resulted in an increasing number of requests for consultation and collaboration from the Organization. In the past, such requests were met by the Regional Adviser in Nutrition, who is presently Director of INCAP, and by occasional short-term consultants. The increasing number of requests makes it necessary to strengthen the regional nutrition staff.

It is planned that the Regional Nutrition Adviser will gradually devote more time to the over-all nutrition program of the Organization. In addition from 1959 increased advisory staff is provided to render services to countries.

In 1959 provision is made for two nutrition advisers and consultants. From 1960 on provision is made for the Regional Nutrition Adviser, three nutrition advisers, a technical assistant and short-term consultants.

AMRO-181, Live Poliovirus Vaccine Studies (See page 236)

Studies of active immunization against poliomyelitis with attenuated live-virus vaccines have been pursued by a small group of investigators during the past nine years. There are now available attenuated strains of the three known types of polioviruses which have been proved safe and effective in extensive laboratory experiments and substantially large trials in man under field conditions.

Following the successful demonstration in Minnesota in 1957 and 1958 (the latter with PAHO participation) of a live vaccine containing the three types of poliovirus, PAHO collaborated in large field trials of the live polio

vaccine in Colombia, Nicaragua, Haiti, Costa Rica and other countries of the Region.

To carry out the serological and viral studies connected with this program, a Tissue Culture Laboratory was set up with the assistance of PAHO, at the Universidad del Valle in Cali, Colombia, and two consultants were provided by PAHO for a period of at least one year. The unit is operating as a PAHO collaborative laboratory for poliomyelitis vaccine field studies and is rendering its specialized services to other countries of the Region. The laboratory will also be used for courses on tissue culture techniques as applied to virology (see AMRO-92).

The epidemiologist is collaborating in various aspects, particularly surveillance, where vaccination programs are now underway.

This project which is financed by a grant from American Cyanamid Co. provides for one virologist; one laboratory adviser; one epidemiologist; short-term consultants; and supplies and equipment.

AMRO-182, Training Course in Dietary and Nutritional Surveys (See page 238)

Nutritional status and dietary habits should determine the nutrition policy in the public health program of a country. These factors are defined through surveys and studies of the use of foods, of nutritional status of the population, of the causes of existing nutritional deficiencies, and of available foods. In order to carry out such surveys it is necessary to have trained technical personnel using standardized survey methods.

Planning for nutrition surveys is currently being carried out in several countries but since nutritional surveying techniques are rather specialized training in these techniques is essential. A course in the techniques of dietary surveys was given in May and June of 1959. This covers only part of the problem, as to determining the extent of nutritional problems, training is also necessary in the techniques of surveying nutritional status.

In order to assist further the countries planning definition of nutrition problems by preparing a cadre of trained workers, a course in nutrition surveys in 1960 as a complementary one to that in dietary surveys held in 1959 is planned. About 40 persons from South America will attend the course.

The 1960 Course, like the 1959 Course, is planned as a project under the Program of Technical Cooperation of OAS.

AMRO-183, Nursing Midwifery (See page 238)

Through integrated health projects in the various countries, the Organization has been active in promoting the concept that maternity care should be provided as a continuous service beginning with the first indication of pregnancy and continuing through the puerperium. Ideally, a complete service includes obstetric supervision throughout the entire maternity cycle, skilled care during delivery, and education of the expectant parents for their role, including care of the newborn.

With few exceptions, a high proportion of deliveries in the Latin American countries, especially in rural areas, are attended by non-medical traditional birth attendants. Legislation has often restricted the official use of this group of workers, and in many areas they are only now receiving some orientation regarding safe procedures

during delivery, as part of the maternal health programs of local health services. At the same time, professional midwives in only a few countries are receiving adequate preparation for their potential role in promoting safe practices as part of the over-all public health program.

Several countries have already indicated need for guidance in determining national policies in midwifery, improving training programs, determining the roles of various types of health workers contributing to maternity care and to the extension and improvement of existing and potential midwifery services. It is proposed to station a consultant in nursing midwifery in one country where there is interest in receiving considerable assistance, to be available later to other countries as requests are received. Provision is made for such a consultant in 1961.

AMRO-185, Hospital Planning and Organization (See page 238)

Effective organization of medical care services involves planning and organization of hospital systems, development of medical care facilities in outpatient departments, dispensaries and health centers, developing proper interrelationship between hospitalization and outpatient medical care facilities, determining the place that medical care facilities should have in over-all plans for development of health services.

To assist in these activities, provision is made for a regional consultant. Secretarial services and fellowships are also provided for in 1961.

AMRO-187, Promotion of Urban Water Supplies (See page 238)

Among the major problems in the urban environment in many areas of the Americas is the lack of a potable water supply in sufficient quantity. To meet the needs in this field, it is proposed, under this project to collaborate with Member Governments in activities directed toward: carrying out a comprehensive study of existing water supplies; estimating future requirements and resources; preparing long-range plans for water supply development; effecting immediate improvements in existing systems; and recommending financial measures for the construction and operation of water supply systems, as required.

Provision is therefore made for short-term consultants in the legal, financial, administrative and technical aspects of water programs to be available to countries as requirements indicate.

AMRO-196, Insecticide Testing Team (See page 238)

The appearance of resistance to chlorinated hydrocarbons by anopheline vector species raises the important question of alternate insecticides to interrupt malaria transmission. At present, some of the insecticides of the organo-phosphorous group seem promising on the basis of laboratory studies and limited field experience.

In El Salvador, *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 are now underway to determine the effectiveness of certain organo-phosphorous insecticides against the vector. The studies require careful planning and observation in selected areas of significant size. An entomologist from AMRO-90 is assigned to this first study.

It seems inevitable that similar studies will be required elsewhere against other vector species and under

varying environmental conditions. As other insecticides become available, these should also be tested.

In 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 under a variety of circumstances. Such studies will require careful planning and evaluation, particularly from the entomological point of view.

In order to proceed with the studies outlined above, several Insecticide Testing Teams will be established, beginning in 1959. Each team will consist of an entomologist, a chemist, and two technical assistants. Its functions will be to assess the effectiveness of the various insecticides, formulations, and application rates against a species in a variety of locations. Provision is made for personnel including consultants, travel and supply requirements for two teams in 1959 and for one more team in 1960 and 1961.

AMRO-197, Research on Resistance of Anophelines to Insecticides (See page 238)

Resistance to chlorinated hydrocarbon insecticides among anophelines in the malarious areas of the Americas appeared in 1958. Such resistance has now been reported from five countries and two other territories. Three species are involved, all vectors. Significant operational changes have been required as a result.

In January, 1959, the Director convoked an ad hoc meeting of experts in the fields of insect physiology and genetics, to seek advice regarding research activities which might throw light on the problem of resistance. It was the consensus that while much might be done in the field towards early detection of resistance, basic laboratory studies of genetics and physiology should be undertaken on the species involved, since reasoning by analogy from one species to another is hazardous. Further, it was recommended that these laboratory studies be coordinated with field work in ecology and morphology.

In order that these studies may be initiated as soon as possible, attempts to colonize both susceptible and resistant strains of vector species are under way. It is proposed that the field work be carried out as a normal function of the Bureau's personnel. To assist in the laboratory studies, it is proposed that grants be made in each of 1959, 1960, and 1961. Such grants to research laboratories of universities would provide for the additional personnel required for this collaboration.

AMRO-198, Administrative Methods and Practices in Public Health (See page 240)

In addition to technical competence it is clear that sound administration and business methods are fundamental for the effective and economical operation of national health establishments. Limited assistance in this field has been given by the Organization in the form of consultative service and fellowships and through the sponsorship of seminars and technical discussion groups.

In 1957 the Directing Council of the PAHO paid special attention to this field in a Resolution (DC10, E/XXXV) which recommended that the Member States give attention to the improvement of administrative practices related to public health programs; and instructed the Director of the PASB, on a gradual basis to collaborate

with the governments in matters concerning administrative methods and procedures in public health services.

Provision is made beginning in 1960 for a chief administrative methods officer. Fellowships are provided in 1961.

AMRO-199, Anopheline Susceptibility Testing (See page 240)

Now that it has been possible to establish standard methods and equipment for the testing of adult anopheline susceptibility to insecticides, it is recommended that each National Malaria Eradication Service establish routine testing services on an ever increasing scale.

Standard test kits for such tests are furnished by WHO. However, it is necessary for each Service to maintain a supply of expendable test papers. In order to assure a continuous supply of such material for susceptibility testing throughout the Americas, it is proposed to establish, as a function of the Malaria Eradication unit in Headquarters, a routine supply of test papers for the countries. No personnel services will be required in 1959 and 1960, but purchases of test papers and shipment to the countries will be made from this project. It will thus be possible to ensure the supply of this material to all countries upon request.

AMRO-200, Conference on Live Poliovirus Vaccines (See page 240)

The Pan American Health Organization, the World Health Organization, and the Sister Elizabeth Kenny Foundation sponsored in June 1959 a scientific conference on live poliovirus vaccines to discuss present status and trends and possibilities for use of this type of vaccine to delineate guidelines for conduct of further work and field programs.

AMRO-211, Seminar on Teaching of Internal Medicine (See page 240)

Success of the seminars on the teaching of preventive medicine and pediatric education has demonstrated the effectiveness of this technique for introducing new ideas on content and methodology of the important aspects of the medical curriculum to the teachers of medicine. The seminars on preventive medicine high-lighted the need for adopting this approach through the entire medical curriculum. Pediatrics was a logical point of approach because of the close link between pediatrics and prevention and because of the existing international activities in this field. The teaching of internal medicine, however, is the heart of the medical curriculum, and is a place for introducing modern ideas concerning the practice of medicine to the general medical graduates.

Stimulated by the results of the earlier seminars, a number of professors of internal medicine had joined together to request the Organization for such a seminar which would review teaching programs in internal medicine, with particular reference to the social and preventive aspects of general medical practice, as well as the use of modern diagnostic and curative techniques.

A short-term consultant will visit schools selected to participate in the seminar and aid the Organization in the conduct of the meeting itself.

Provision has been made for short-term consultant, participants, supplies and equipment.

AMRO-212, Seminar on Teaching of Nursing Auxiliaries (See page 240)

The pattern of nursing care in the Americas will, for the foreseeable future, count heavily on the role of nursing auxiliaries. Proper training of these health workers is essential for their full utilization. On the basis of present knowledge and experience with nursing auxiliaries, seminars for instructors and supervisors of this personnel will be held in 1961, to discuss their functions and preparation.

The ten-day seminar planned for 1961 will be held in Central America and will be attended by instructors of courses for auxiliaries, by supervisors of services employing them and by PAHO nursing education advisers. It is expected that a similar seminar will be conducted later in South America.

Provision is made for short-term consultants, for participants, and for some supplies and equipment.

AMRO-213, Seminar on Public Health Nursing Services (See page 240)

Public health nurses working in integrated health projects in Latin America meet many common problems in the development and extension of nursing services in rural areas.

A seminar to allow them to share experiences so that more practical and effective nursing techniques and procedures may be developed for use in related health programs will be held in Montevideo in 1961. Central themes for discussion will be based in part on the results of the seminars on integrated health projects and will include such topics as determination of priorities for nursing services with existing professional and auxiliary staffs, practical supervisory techniques, administration of nursing services particularly in programs for control of diarrheal diseases and malnutrition, definition of functions of auxiliary personnel with particular relation to MCH and family centered services, function of nursing personnel in collection of mortality and morbidity data, development of in-service training programs for all levels of nursing staffs, and appraisal of public health nursing services in rural areas.

Participants from Argentina, Brazil, Chile, Paraguay, Uruguay and Venezuela will be primarily public health nurses with experience in administration at national levels concerned and those responsible for services in large rural areas of demonstration or pilot programs. Public health administrators, statisticians, nurse educators, hospital nurses, and others who collaborate with public health nurses for the administration and extension of public health nursing services will also attend.

Provision is made in 1961 for consultants, participants and conference costs.

PART III

SECTION 3 - Publications
(See page 242)

The sum of \$55,000 is provided for the Bulletin in 1961, representing an increase of \$10,000 over the amount budgeted for 1960. This amount will allow continued enlargement of the publications's volume, printing of a greater number of copies and increased printing costs.

A small increase of \$500 is reflected in 1961 over the amount budgeted for 1960 for Statistical Publications

and Reports. This will allow for the purchase of guides and reprints as well as acquisition and distribution among health authorities and institutions of publications on epidemiological and statistical matters.

An amount of \$40,000 is budgeted for Special Publications. This amount reflects no increase over the amount budgeted for 1960.

PART III

SECTION 4 - Repatriation Grant
(See page 242)

Provision is made in this Section for reimbursement of accrued repatriation grant entitlement, as provided for in the Staff Rules, to terminating staff members.

The amount provided is based on the average annual cost over a period of years.

PART IV

Amount for Increasing the Working Capital Fund
(See page 242)

The condition of the Working Capital Fund was discussed at length during the 37th Meeting of the Executive Committee. As a result of the discussion the Committee resolved to recommend that the Director, in preparing the program and budget for 1961 and future years, assign a proportion of the budget for the gradual increase

of the Fund until it reaches the established level.

Pursuant to the resolution there is budgeted, therefore, an amount of \$300,000 which is included in the estimates for 1961.

S C H E D U L E S

PAN AMERICAN HEALTH ORGANIZATION													
REGULAR BUDGET						OTHER FUNDS						SUMMARY	
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
16	16	16	\$ 196,843	\$ 220,463	\$ 190,764	1	1	1	\$ 8,375	\$ 7,405	\$ 8,734	PART I PAN AMERICAN HEALTH ORGANIZATION	
140	146	146	1,328,327	1,427,858	1,437,799	17	17	17	160,656	161,861	162,178	PART II PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS	
162	181	194	2,074,830	2,451,679	2,871,437	284	324	324	3,660,459	4,323,901	4,298,925	PART III PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS	
					300,000							PART IV AMOUNT FOR INCREASING THE WORKING CAPITAL FUND	
318	343	356	3,600,000	4,100,000	4,800,000	302	342	342	3,829,490	4,493,167	4,469,837	TOTAL - ALL PARTS	
			100,000	100,000	100,000							LESS MISCELLANEOUS INCOME	
			3,500,000	4,000,000	4,700,000							TOTAL FOR ASSESSMENT	
16	16	16	79,239	83,689	86,169	1	1	1	2,800	4,917	5,117	PART I PAN AMERICAN HEALTH ORGANIZATION	
												Sect. 1. <u>Conference Services</u>	
												Sect. 2. <u>Organizational Meetings</u>	
			51,452	75,959	39,126							Ch. 1. Meetings of the Pan American Sanitary Conference, Directing Council, Executive Committee and WHO Regional Committee	
			16,292	16,292	16,292							Ch. 2. Meetings of the Executive Committee	
			67,744	92,251	55,418								
			900	1,350	1,350							Sect. 3. <u>Temporary Personnel</u>	
			11,485	12,132	12,491				133	234	243	Sect. 4. <u>Common Staff Costs</u>	
			1,784	1,884	1,939				63	111	115	Ch. 1. Pension	
			14,229	14,625	14,625				555	950	950	Ch. 2. Insurance	
			256	256	256				224	393	409	Ch. 3. Post Adjustment Allowance	
			4,600	5,000	5,000				800	800	800	Ch. 4. Service Benefit	
			7,600						3,800			Ch. 5. Repatriation Grant	
			2,365	2,495	6,615						1,100	Ch. 6. Dependents' Allowance	
			6,641	6,781	6,901							Ch. 7. Recruitment Costs	
												Ch. 8. Home Leave	
												Ch. 9. Reimbursement of Income Tax	
			48,960	43,173	47,827				5,575	2,488	3,617		
16	16	16	196,843	220,463	190,764	1	1	1	8,375	7,405	8,734	TOTAL - PART I	
												PART II PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS	
												Sect. 1. <u>Executive Offices</u>	
7	7	7	63,437	64,636	65,066	2	2	2	13,380	13,540	13,700	Ch. 1. Office of the Director	
6	6	6	32,917	34,657	35,117							Ch. 2. Library	
32	32	32	180,113	187,358	192,725							Ch. 3. Information and Publications Branch	
45	45	45	276,467	286,651	292,908	2	2	2	13,380	13,540	13,700		

WORLD HEALTH ORGANIZATION												T O T A L S					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS						NUMBER OF POSTS			ESTIMATED EXPENDITURE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
4	4	4	40,982	67,689	46,114	1	1	1	9,375	9,628	9,883	22	22	22	255,575	305,185	255,495
54	55	55	624,990	654,436	679,729	10	10	10	68,605	71,241	73,592	221	228	228	2,182,578	2,315,396	2,353,298
47	50	51	947,845	1,018,249	1,044,579	91	77	75	1,066,100	918,000	918,000	584	632	644	7,749,234	8,711,829	9,132,941
																	300,000
105	109	110	1,613,817	1,740,374	1,770,422	102	88	86	1,144,080	998,869	1,001,475	827	882	894	10,187,387	11,332,410	12,041,734
4	4	4	22,871	23,667	24,502	1	1	1	5,817	6,017	6,217	22	22	22	110,727	118,290	122,005
			7,400	28,420	9,366										58,852	104,379	48,492
															16,292	16,292	16,292
			7,400	28,420	9,366										75,144	120,671	64,784
															900	1,350	1,350
			3,329	3,446	3,567				855	884	914				15,802	16,696	17,215
			514	533	551				131	135	140				2,492	2,663	2,745
			4,725	4,725	4,725				950	950	950				20,459	21,250	21,250
				300	300										480	649	665
			900	900	900										300	300	300
			900	5,325	1,800										6,300	6,700	6,700
			343	373	403										11,400		
									1,622	1,642	1,662				3,265	7,820	9,515
															8,606	8,796	8,966
			10,711	15,602	12,246				3,558	3,611	3,666				68,804	64,874	67,356
4	4	4	40,982	67,689	46,114	1	1	1	9,375	9,628	9,883	22	22	22	255,575	305,185	255,495
1	1	1	23,140	24,440	24,440				1,500	1,500	1,500	9	9	9	101,457	104,116	104,706
			5,000	5,000	5,000							7	7	7	37,917	39,657	40,117
4	4	4	75,872	83,046	87,912				1,506	1,586	1,581	36	36	36	257,491	271,990	282,218
5	5	5	104,012	112,486	117,352				3,006	3,086	3,081	52	52	52	396,865	415,763	427,041

PAN AMERICAN HEALTH ORGANIZATION												SUMMARY	
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
2	2	2	19,665	25,195	25,530					405	405	Sect. 2. <u>Division of Education and Training</u> Ch. 1. Office of the Chief Ch. 2. Fellowships Branch Ch. 3. Professional Education Branch	
7	8	8	35,720	39,800	42,134	2	2	2	9,975	10,360	10,745		
6	6	6	34,595	35,620	36,665								
15	16	16	89,980	100,615	104,329	2	2	2	9,975	10,765	11,150		
												Sect. 3. <u>Division of Administration</u> Ch. 1. Office of the Chief Ch. 2. Administrative Management and Personnel Branch Ch. 3. Budget and Finance Branch Ch. 4. General Services Office Ch. 5. Supply Office	
2	2	2	33,130	29,985	29,985				6,000	6,300	6,300		
9	9	9	47,529	49,313	50,928	2	2	2	7,123	7,473	7,823		
17	17	17	85,917	89,166	92,365	1	1	1	4,954	5,159	5,364		
18	18	18	78,955	80,784	82,360	1	1	1	3,070	3,200	3,330		
7	7	7	33,716	34,871	35,933								
53	53	53	279,247	284,119	291,571	4	4	4	21,147	22,132	22,817		
												Sect. 4. <u>Division of Public Health</u> Ch. 1. Office of the Chief Ch. 2. Health Promotion Branch Ch. 3. Communicable Diseases Branch Ch. 4. Environmental Sanitation Branch Ch. 5. Malaria Eradication	
3	3	3	31,482	40,337	40,672				3,200	4,450	4,450		
3	3	3	18,170	18,780	19,390								
16	21	21	87,618	114,524	124,510	2	2	2	10,980	11,365	11,750		
2	2	2	12,257	12,644	13,044								
3	3	3	41,054	41,614	42,485	7	7	7	52,313	50,756	51,771		
27	32	32	190,581	227,899	240,101	9	9	9	66,493	66,571	67,971		
												Sect. 5. <u>Temporary Personnel</u>	
			8,200	9,546	8,962				2,500	2,500	2,500		
												Sect. 6. <u>Common Staff Costs</u> Ch. 1. Pension Ch. 2. Insurance Ch. 3. Post Adjustment Allowance Ch. 4. Service Benefit Ch. 5. Repatriation Grant Ch. 6. Dependents' Allowance Ch. 7. Recruitment Costs Ch. 8. Home Leave Ch. 9. Reimbursement of Income Tax	
			107,818	114,209	118,042				5,567	5,745	5,911		
			16,856	18,004	18,659				1,951	2,015	2,075		
			86,983	90,133	91,045				8,475	8,475	8,475		
									3,242	3,357	3,468		
			32,900	34,300	34,100				2,300	2,300	2,300		
			22,800	7,600					7,600				
			9,260	29,270	9,370					5,000	2,200		
			95,408	96,808	100,008				3,815	3,965	4,115		
			372,025	390,324	371,224				32,950	30,857	28,544		
												Sect. 7. <u>Common Services - Headquarters</u> Ch. 1. Space and Equipment Services Ch. 2. Other Services Ch. 3. Supplies and Materials Ch. 4. Fixed Charges and Claims Ch. 5. Acquisition of Capital Assets	
			48,439	47,259	47,259				6,296	6,143	6,143		
			38,173	38,173	38,173				4,962	4,962	4,962		
			19,470	30,527	30,527				2,531	3,969	3,969		
			3,245	3,245	3,245				422	422	422		
			2,500	9,500	9,500								
			111,827	128,704	128,704				14,211	15,496	15,496		
140	146	146	1,328,327	1,427,858	1,437,799	17	17	17	160,656	161,861	162,178	TOTAL - PART II	

* Includes post funded by the Malaria Eradication Special Account.

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1	19,315	19,630	19,630				1,000	1,000	1,000	3	3	3	39,980	46,230	46,565
9	9	9	50,986	52,512	53,873	1	1	1	3,390	3,540	3,690	19	20	20	100,071	106,212	110,442
1	1	1	7,300	7,525	7,750							7	7	7	41,895	43,145	44,415
11	11	11	77,601	79,667	81,253	1	1	1	4,390	4,540	4,690	29	30	30	181,946	195,587	201,422
			4,500	6,185	6,185							2	2	2	43,630	42,470	42,470
5	5	5	29,333	30,353	31,183	3	3	3	12,933	13,478	14,023	19	19	19	96,918	100,617	103,957
9	9	9	45,883	47,278	48,542	4	4	4	16,338	16,843	17,348	31	31	31	153,092	158,446	163,619
7	7	7	31,174	31,971	32,556	1	1	1	4,267	4,427	4,587	27	27	27	117,466	120,382	122,833
4*	4*	4*	18,552	19,062	19,572	1	1	1	3,890	4,040	4,190	12	12	12	56,158	57,973	59,695
25	25	25	129,442	134,849	138,038	9	9	9	37,428	38,788	40,148	91	91	91	467,264	479,888	492,574
			19,255	23,970	23,970				2,000	3,060	3,060	3	3	3	55,937	71,817	72,152
5	6	6	26,842	32,926	34,051							8	9	9	45,012	51,706	53,441
6	6	6	33,513	34,518	35,340							24	29	29	132,111	160,407	171,600
2	2	2	13,096	13,506	13,933							4	4	4	25,353	26,150	26,977
												10	10	10	93,367	92,370	94,256
13	14	14	92,706	104,920	107,294				2,000	3,060	3,060	49	55	55	351,780	402,450	418,426
				3,146	3,730										10,700	15,192	15,192
			39,575	41,081	42,060				5,050	5,230	5,411				158,010	166,265	171,424
			6,958	7,269	7,447				919	954	987				26,684	28,242	29,168
			42,084	42,540	42,540				950	950	950				138,492	142,098	143,010
			2,767	3,005	3,108				756	789	821				6,765	7,151	7,397
				450	450										450	450	450
			13,410	13,500	13,500				180	180	180				48,790	50,280	50,080
			17,500						1,200						49,100	7,600	
			800	900	11,600						500				10,060	35,170	23,670
			43,138	43,876	44,610				3,461	3,561	3,661				145,822	148,210	152,394
			166,232	152,621	165,315				12,516	11,664	12,510				583,723	585,466	577,593
			23,260	22,693	22,693				4,105	4,005	4,005				82,100	80,100	80,100
			18,330	18,330	18,330				3,235	3,235	3,235				64,700	64,700	64,700
			9,349	14,666	14,666				1,650	2,588	2,588				33,000	51,750	51,750
			1,558	1,558	1,558				275	275	275				5,500	5,500	5,500
			2,500	9,500	9,500										5,000	19,000	19,000
			54,997	66,747	66,747				9,265	10,103	10,103				190,300	221,050	221,050
54	55	55	624,990	654,436	679,729	10	10	10	68,605	71,241	73,592	221	228	228	2,182,578	2,315,396	2,353,298

PAN AMERICAN HEALTH ORGANIZATION															
REGULAR BUDGET						OTHER FUNDS						SUMMARY			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE						
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961				
			\$	\$	\$				\$	\$	\$				
15	16	16	128,065	145,660	152,953	1	1	1	59,244	60,789	61,021	PART III PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS Sect. 1. <u>Zone Offices</u> Ch. 1. Zone I Ch. 2. Zone II Ch. 3. Zone III Ch. 4. Zone IV Ch. 5. Zone V Ch. 6. Zone VI			
16	16	16	113,781	98,750	106,159	2	2	2	5,020	5,024	5,218				
20	20	20	132,535	132,863	135,958	1	2	2	2,809	4,955	5,809				
18	18	18	117,854	124,695	131,013	1	1	1	1,899	2,191	2,302				
12	13	13	70,006	89,340	94,935										
16	18	18	109,365	110,871	117,908										
97	101	101	671,606	702,179	738,926	5	6	6	68,972	72,959	74,350				
2	2	3	30,947 7,800	30,318	43,533	137	160	160	2,604,067	3,218,654	3,183,985			Sect. 2. <u>Programs</u> Ch. 1. Malaria Ch. 2. Tuberculosis Ch. 3. Venereal Diseases and Treponematoses Ch. 4. Endemo-Epidemic Diseases Ch. 5. Virus Diseases Ch. 6. Leprosy Ch. 7. Public Health Administration Ch. 8. Dental Health Ch. 9. Vital and Health Statistics Ch. 10. Nursing Ch. 11. Social and Occupational Health Ch. 12. Health Education of the Public Ch. 13. Maternal and Child Health Ch. 14. Mental Health Ch. 15. Nutrition Ch. 16. Environmental Sanitation Ch. 17. Education and Training Ch. 18. Other Projects Foot-and-Mouth Disease Center Less: <u>Delays in implementation of</u> <u>of new WHO projects</u>	
4	5	4	65,932	79,071	68,824										
13	13	14	239,741	255,230	291,943	29	30	30	92,424	104,794	82,973				
4	4	4	118,273	105,354	127,719	3	3	3	81,462	79,914	75,840				
	1	1		19,630	19,325										
25	31	38	497,932	626,803	746,690				6,000						
1	1	1	39,839	36,442	35,462										
2	4	5	20,702	45,516	74,161										
3	6	6	48,122	96,428	112,939										
		1	17,357	33,500	28,821										
1	1	2	3,120	7,945	32,295										
3		1	56,323	15,600	43,793										
	2	2		32,973	35,284										
5	7	7	79,418	127,915	139,358	17	17	17	380,436	379,011	350,000				
1	1	1	22,884	26,975	44,406										
1	2	3	21,876	42,248	87,038										
			58,458	73,052	95,920	93	108	108	402,098	458,569	521,777				
65	80	93	1,328,724	1,655,000	2,027,511	279	318	318	3,566,487	4,240,942	4,214,575				
			45,000	45,000	55,000							Sect. 3. <u>Publications</u> Ch. 1. PASB Bulletin Ch. 2. Statistical Publications and Reports Ch. 3. Special Publications Ch. 4. Special Malaria Publications			
			5,000	5,000	5,500										
			20,000	40,000	40,000										
									25,000	10,000	10,000				
			70,000	90,000	100,500				25,000	10,000	10,000				
			4,500	4,500	4,500							Sect. 4. <u>Repatriation Grant</u> TOTAL - PART III			
162	181	194	2,074,830	2,451,679	2,871,437	284	324	324	3,660,459	4,323,901	4,298,925				
					300,000							PART IV 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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
2	2	2	980	2,014	2,014							16	17	17	188,289	208,463	215,988
1	1	1	29,346	32,015	31,854							20	20	20	148,147	135,789	143,231
			19,521	20,582	22,274							22	23	23	154,865	158,400	164,041
			5,460	4,078	4,078							19	19	19	125,213	130,964	137,393
1	1	1	10,578	13,695	15,158							13	14	14	80,584	103,035	110,093
			4,080	2,840	2,840							16	18	18	113,445	113,711	120,748
4	4	4	69,965	75,224	78,218							106	111	111	810,543	850,362	891,494
	5	5		55,717	67,583	20	8	7	210,444	95,727	90,569	159	168	167	2,845,458	3,314,381	3,274,554
						1	1	1	16,145	22,343	16,653	1	8	9	23,945	108,378	127,769
3			38,121			1	1	1	12,711	13,010	14,018	8	6	5	116,764	92,081	82,842
			4,710			22	15	15	232,124	146,648	150,409	64	58	59	568,999	506,672	525,325
			22,684	13,450	6,700	1	1	1	26,886	13,632	14,391	8	8	8	249,305	212,350	224,650
1	1	1	26,109	20,510	21,269	1	1	1	9,657	11,457	12,631	2	3	3	35,766	51,597	53,225
18	23	23	366,429	442,182	449,042	35	38	35	407,598	458,261	435,132	78	92	96	1,271,959	1,527,246	1,630,864
												1	1	1	45,839	36,442	35,462
3	3	3	59,408	72,706	67,788				41,263	29,955	34,255	5	7	8	121,373	148,177	176,204
14	10	11	203,158	196,460	196,668	6	8	9	50,391	73,322	85,908	23	24	26	301,671	366,210	395,515
						1	1	1	9,724	10,611	9,899	1	1	2	27,081	44,111	38,720
2	2	2	23,308	31,897	31,973							3	3	4	26,428	39,842	64,268
1	1	1	14,868	19,157	25,866							4	1	2	71,191	34,757	69,659
			2,370										2	2	2,370	32,973	35,284
1	1	1	74,015	62,167	61,746	1	1	1	17,007	19,622	17,137	23	25	25	476,861	526,548	506,495
			42,700	38,200	47,442	2	2	3	25,130	23,412	36,998	4	4	5	122,029	112,554	143,150
									7,020			1	2	3	71,596	80,448	134,480
															58,458	73,052	95,920
												93	108	108	402,098	458,569	521,777
			(9,421)		(9,716)											(9,421)	(9,716)
43	46	47	877,880	943,025	966,361	91	77	75	1,066,100	918,000	918,000	478	521	533	6,839,191	7,756,967	8,126,447
															45,000	45,000	55,000
															5,000	5,000	5,500
															20,000	40,000	40,000
															25,000	10,000	10,000
															95,000	100,000	110,500
															4,500	4,500	4,500
47	50	51	947,845	1,018,249	1,044,579	91	77	75	1,066,100	918,000	918,000	584	632	644	7,749,234	8,711,829	9,132,941
																	300,000

PAN AMERICAN HEALTH ORGANIZATION												BUDGET SUMMARY BY RELATED ACTIVITY
ESTIMATED EXPENDITURE												
REGULAR BUDGET						OTHER FUNDS						
1959		1960		1961		1959		1960		1961		
\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	
63,437	1.8	64,636	1.6	65,066	1.4	13,380	.3	13,540	.3	13,700	.3	GROUP I <u>Administrative Services</u> Office of the Director Division of Administration (Excluding Supply Office) Temporary Personnel Common Services - Headquarters Common Staff Costs
245,531	6.8	249,248	6.1	255,638	5.3	21,147	.6	22,132	.5	22,817	.5	
3,072	.1	3,577	.1	3,358	.1	278	*	278	*	278	*	
111,827	3.1	128,704	3.1	128,704	2.7	14,211	.4	15,496	.3	15,496	.3	
136,883	3.8	136,898	3.3	139,736	2.9	3,307	.1	3,415	.1	3,529	.1	
560,750	15.6	583,063	14.2	592,502	12.4	52,323	1.4	54,861	1.2	55,820	1.2	TOTAL - GROUP I
												GROUP II
190,581	5.3	227,899	5.6	240,101	5.0	66,493	1.7	66,571	1.5	67,971	1.5	<u>Technical Services and Supply</u> Division of Public Health Division of Education and Training Library Information and Publications Branch Supply Office Temporary Personnel Zone Offices Common Staff Costs
89,980	2.5	100,615	2.5	104,329	2.2	9,975	.3	10,765	.2	11,150	.2	
32,917	1.0	34,657	.9	35,117	.7							
180,113	5.0	187,358	4.6	192,725	4.0							
33,716	.9	34,871	.8	35,933	.8							
5,128	.1	5,969	.1	5,604	.1	2,222	.1	2,222	.1	2,222	.1	TOTAL - GROUP II
671,606	18.7	702,179	17.1	738,926	15.4	68,972	1.8	72,959	1.6	74,350	1.7	
235,142	6.5	253,426	6.2	231,488	4.8	29,643	.7	27,442	.6	25,015	.6	
1,439,183	40.0	1,546,974	37.8	1,584,223	33.0	177,305	4.6	179,959	4.0	180,708	4.1	
												GROUP III
30,947	.8					2,604,067	68.0	3,218,654	71.6	3,183,985	71.2	<u>Field Projects and Publications</u> <u>Programs</u> Malaria Tuberculosis Venereal Diseases and Treponematoses Endemo-Epidemic Diseases Virus Diseases Leprosy Public Health Administration Dental Health Vital and Health Statistics Nursing Social and Occupational Health Health Education of the Public Maternal and Child Health Mental Health Nutrition Environmental Sanitation Education and Training Other Projects Foot-and-Mouth Disease Center
7,800	.2	30,318	.8	43,533	.9							
65,932	1.8	79,071	1.9	68,824	1.4							
239,741	6.7	255,230	6.2	291,943	6.1	92,424	2.4	104,794	2.3	82,973	1.9	
118,273	3.3	105,354	2.6	127,719	2.7	81,462	2.1	79,914	1.8	75,840	1.7	
497,932	13.8	626,803	15.3	746,690	15.6							Total - Programs
39,839	1.1	36,442	.9	35,462	.7	6,000	.2					
20,702	.6	45,516	1.1	74,161	1.5							
48,122	1.3	96,428	2.4	112,939	2.4							
17,357	.5	33,500	.8	28,821	.6							
3,120	.1	7,945	.2	32,295	.7							Publications
56,323	1.6	15,600	.4	43,793	.9							
		32,973	.8	35,284	.7							
79,418	2.3	127,915	3.1	139,358	2.9	380,436	9.9	379,011	8.5	350,000	7.8	
22,884	.6	26,975	.6	44,406	.9							
21,876	.6	42,248	1.0	87,038	1.8							Repatriation Grant
58,458	1.6	73,052	1.8	95,920	2.0	402,098	10.5	458,569	10.2	521,777	11.7	
1,328,724	36.9	1,655,000	40.4	2,027,511	42.2	3,566,487	93.1	4,240,942	94.4	4,214,575	94.3	
70,000	1.9	90,000	2.2	100,500	2.1	25,000	.7	10,000	.2	10,000	.2	
4,500	.1	4,500	.1	4,500	.1							
1,403,224	38.9	1,749,500	42.7	2,132,511	44.4	3,591,487	93.8	4,250,942	94.6	4,224,575	94.5	TOTAL - GROUP III
												GROUP IV
79,239	2.2	83,689	2.0	86,169	1.8	2,800	.1	4,917	.1	5,117	.1	<u>Part I-Pan American Health Organization</u> Conference Services Organizational Meetings Temporary Personnel Common Staff Costs
67,744	1.9	92,251	2.3	55,418	1.2							
900	*	1,350	*	1,350	*							
48,960	1.4	43,173	1.0	47,827	1.0	5,575	.1	2,488	.1	3,617	.1	
196,843	5.5	220,463	5.3	190,764	4.0	8,375	.2	7,405	.2	8,734	.2	
				300,000	6.2							TOTAL - GROUP IV
												Amount for Increasing the Working Capital Fund
3,600,000	100.0	4,100,000	100.0	4,800,000	100.0	3,829,490	100.0	4,493,167	100.0	4,469,837	100.0	TOTAL - BUDGET

* Less than .05 per cent

WORLD HEALTH ORGANIZATION												TOTAL											
ESTIMATED EXPENDITURE																							
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS																	
1959		1960		1961		1959		1960		1961		1959		1960		1961							
\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%	\$	%						
23,140	1.4	24,440	1.4	24,440	1.4	1,500	.2	1,500	.2	1,500	.1	101,457	1.0	104,116	.9	104,706	.9						
110,890	6.9	115,787	6.6	118,466	6.7	33,538	2.9	34,748	3.5	35,958	3.6	411,106	4.0	421,915	3.7	432,879	3.6						
		1,156	.1	1,370	.1							3,350	*	5,011	*	5,006	*						
54,997	3.4	66,747	3.8	66,747	3.7	9,265	.8	10,103	1.0	10,103	1.0	190,300	1.9	221,050	2.0	221,050	1.8						
59,236	3.7	58,240	3.4	60,350	3.4	11,261	1.0	10,343	1.0	11,123	1.1	210,687	2.1	208,896	1.9	214,738	1.8						
248,263	15.4	266,370	15.3	271,373	15.3	55,564	4.9	56,694	5.7	58,684	5.8	916,900	9.0	960,988	8.5	978,379	8.1						
92,706	5.8	104,920	6.0	107,294	6.1	2,000	.2	3,060	.3	3,060	.3	351,780	3.4	402,450	3.6	418,426	3.5						
77,601	4.8	79,667	4.6	81,253	4.6	4,390	.4	4,540	.4	4,690	.5	181,946	1.8	195,587	1.7	201,422	1.7						
5,000	.3	5,000	.3	5,000	.3							37,917	.4	39,657	.3	40,117	.3						
75,872	4.7	83,046	4.8	87,912	5.0	1,506	.1	1,586	.2	1,581	.2	257,491	2.5	271,990	2.4	282,218	2.3						
18,552	1.2	19,062	1.1	19,572	1.1	3,890	.3	4,040	.4	4,190	.4	56,158	.6	57,973	.5	59,695	.5						
		1,990	.1	2,360	.1							7,350	.1	10,181	.1	10,186	.1						
69,965	4.3	75,224	4.3	78,218	4.4							810,543	7.9	850,362	7.5	891,494	7.4						
106,996	6.6	94,381	5.4	104,965	5.9	1,255	.1	1,321	.1	1,387	.1	373,036	3.7	376,570	3.3	362,855	3.0						
446,692	27.7	463,290	26.6	486,574	27.5	13,041	1.1	14,547	1.4	14,908	1.5	2,076,221	20.4	2,204,770	19.4	2,266,413	18.8						
38,121	2.4	46,296	2.6	57,867	3.3	210,444	18.4	95,727	9.6	90,569	9.0	2,845,458	27.9	3,314,381	29.2	3,274,554	27.2						
4,710	.3					16,145	1.4	22,343	2.2	16,653	1.7	23,945	.2	98,957	.9	118,053	1.0						
22,684	1.4	13,450	.8	6,700	.4	12,711	1.1	13,010	1.3	14,018	1.4	116,764	1.1	92,081	.8	82,842	.7						
26,109	1.6	20,510	1.2	21,269	1.2	232,124	20.3	146,648	14.7	150,409	15.0	568,999	5.6	506,672	4.5	525,325	4.4						
366,429	22.7	442,182	25.4	449,042	25.4	26,886	2.4	13,632	1.4	14,391	1.4	249,305	2.4	212,350	1.9	224,650	1.9						
						9,657	.8	11,457	1.1	12,631	1.3	35,766	.4	51,597	.5	53,225	.4						
59,408	3.7	72,706	4.2	67,788	3.8	41,263	3.6	29,955	3.0	34,255	3.4	1,271,959	12.5	1,527,246	13.5	1,630,864	13.5						
203,158	12.6	196,460	11.3	196,668	11.1	50,391	4.4	73,322	7.3	85,908	8.6	45,839	.4	36,442	.3	35,462	.3						
						9,724	.9	10,611	1.1	9,899	1.0	121,373	1.2	148,177	1.3	176,204	1.5						
23,308	1.4	31,897	1.8	31,973	1.8							301,671	3.0	366,210	3.2	395,515	3.3						
14,868	.9	19,157	1.1	25,866	1.4							44,111	.3	44,111	.4	38,720	.3						
2,370	.1											26,428	.3	39,842	.4	64,268	.5						
												71,191	.7	34,757	.3	69,659	.6						
												2,370	*	32,973	.3	35,284	.3						
74,015	4.6	62,167	3.6	61,746	3.5	17,007	1.5	19,622	2.0	17,137	1.7	476,861	4.7	526,548	4.6	506,495	4.2						
42,700	2.7	38,200	2.2	47,442	2.7	25,130	2.2	23,412	2.3	36,998	3.7	122,029	1.2	112,554	1.0	143,150	1.2						
						7,020	.6					71,596	.7	80,448	.7	134,480	1.1						
												58,458	.6	73,052	.6	95,920	.8						
												402,098	4.0	458,569	4.1	521,777	4.4						
877,880	54.4	943,025	54.2	966,361	54.6	1,066,100	93.2	918,000	91.9	918,000	91.7	6,839,191	67.2	7,756,967	68.5	8,126,447	67.6						
												95,000	.9	100,000	.9	110,500	.9						
												4,500	*	4,500	*	4,500	*						
877,880	54.4	943,025	54.2	966,361	54.6	1,066,100	93.2	918,000	91.9	918,000	91.7	6,938,691	68.1	7,861,467	69.4	8,241,447	68.5						
22,871	1.4	23,667	1.4	24,502	1.4	5,817	.5	6,017	.6	6,217	.6	110,727	1.1	118,290	1.0	122,005	1.0						
7,400	.4	28,420	1.6	9,366	.5							75,144	.7	120,671	1.1	64,784	.5						
												900	*	1,350	*	1,350	*						
10,711	.7	15,602	.9	12,246	.7	3,558	.3	3,611	.4	3,666	.4	68,804	.7	64,874	.6	67,356	.6						
40,982	2.5	67,689	3.9	46,114	2.6	9,375	.8	9,628	1.0	9,883	1.0	255,575	2.5	305,185	2.7	255,495	2.1						
																300,000	2.5						
1,613,817	100.0	1,740,374	100.0	1,770,422	100.0	1,144,080	100.0	998,869	100.0	1,001,475	100.0	10,187,387	100.0	11,332,410	100.0	12,041,734	100.0						

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONNEL COSTS			DUTY TRAVEL		
	1959	1960	1961	1959	1960	1961
	\$	\$	\$	\$	\$	\$
PR PAN AMERICAN HEALTH ORGANIZATION - REGULAR BUDGET	725,463	971,915	1,163,290	151,062	224,745	265,428
PO PAN AMERICAN HEALTH ORGANIZATION - OTHER FUNDS	1,877,837	2,246,207	2,304,533	302,093	399,411	402,064
WR WORLD HEALTH ORGANIZATION - REGULAR BUDGET	468,423	522,574	537,305	117,488	103,761	113,011
TA WORLD HEALTH ORGANIZATION - TECHNICAL ASSISTANCE FUNDS	889,069	768,428	758,649	86,062	61,957	68,105
TOTAL - ALL FUNDS	3,960,792	4,509,124	4,763,777	656,705	789,874	848,608
MALARIA						
PO Argentina-8, Malaria Eradication						
PO Bolivia-4, Malaria Eradication	43,265	48,265	45,110	10,860	10,860	10,860
TA Bolivia-4, Malaria Eradication	11,690	13,036	10,473	1,193	1,530	2,220
PO Brazil-24, Malaria Eradication	14,295	11,882	14,869	1,630	1,630	1,630
PO Brazil-41, Malaria Eradication (Sao Paulo)	41,081	50,691	46,469	7,620	7,620	5,820
PO British Guiana-5, Malaria Eradication	2,800	2,800	2,800	2,400	2,400	2,400
PO British Honduras-1, Malaria Eradication	14,827	17,551	20,226	4,342	6,742	7,492
PO Colombia-5, Malaria Eradication	95,558	93,067	101,979	14,904	17,664	17,664
PO Costa Rica-2, Malaria Eradication	26,411	27,277	29,726	6,997	9,685	9,685
PO Cuba-5, Malaria Eradication	22,160	20,824	23,513	1,800	1,800	1,800
PO Dominican Republic-2, Malaria Eradication	48,905	58,937	53,243	10,960	10,960	10,960
PO Ecuador-14, Malaria Eradication	29,824	40,615	41,446	11,820	14,028	14,228
TA Ecuador-14, Malaria Eradication	21,524	12,147	11,167	1,687	1,354	1,477
PO El Salvador-2, Malaria Eradication	34,052	39,760	42,655	6,442	7,334	7,334
TA El Salvador-2, Malaria Eradication	6,691			1,000		
PO Guatemala-1, Malaria Eradication	20,547	39,970	46,214	3,897	11,097	11,097
TA Guatemala-1, Malaria Eradication	20,841			945		
PO Haiti-4, Malaria Eradication	86,338	106,359	120,286	11,839	21,032	21,032
TA Haiti-4, Malaria Eradication	1,230			130		
PO Honduras-1, Malaria Eradication	17,655	40,870	39,100	3,222	8,222	8,222
TA Honduras-1, Malaria Eradication	17,515			1,288		
PO Jamaica-2, Malaria Eradication	45,387	42,945	50,262	4,270	4,270	4,270
PO Mexico-33, Diethylin Toxicity Studies						
PO Mexico-53, Malaria Eradication	7,839	8,544	8,299	2,400	2,400	2,400
TA Mexico-53, Malaria Eradication	51,363	41,639	38,605	7,200	4,230	4,230
PO Nicaragua-1, Malaria Eradication	37,287	41,827	42,907	7,200	8,200	8,200
PO Panama-2, Malaria Eradication	18,365	44,273	45,083	3,228	8,228	8,228
TA Panama-2, Malaria Eradication	20,126			2,442		
PO Paraguay-1, Malaria Eradication	8,816	35,997	37,640		7,360	7,360
TA Paraguay-1, Malaria Eradication	17,420			1,800		
PO Peru-5, Malaria Eradication	50,089	50,643	56,881	12,750	19,153	18,642
TA Peru-5, Malaria Eradication	22,559	19,791	20,344	1,800	2,000	2,053
PO Surinam-1, Malaria Eradication	22,944	25,806	26,635	4,025	4,025	4,025
PO Trinidad-3, Malaria Eradication						
PO Windward Islands-2, Malaria Eradication	16,384	16,665	17,305	2,326	2,326	2,326
PR AMRO-90, Malaria Technical Advisory Services (Regional)	22,637			7,710		
PO AMRO-90, Malaria Technical Advisory Services (Regional)	88,387	120,413	123,302	36,000	31,525	31,525
PO AMRO-114, Training Center for Malaria Eradication (Mexico)	16,569	18,401	17,042	1,250	1,250	1,250
PO AMRO-117, Malaria Technical Advisory Services (Zone I)	88,059	85,095	95,985	15,180	16,963	16,963
PO AMRO-118, Malaria Technical Advisory Services (Zone III)	77,938	81,226	86,881	16,701	25,984	25,984
PO AMRO-119, Malaria Technical Advisory Services (Zone IV)	63,341	66,065	74,312	16,827	16,827	16,827
PO AMRO-120, Malaria Technical Advisory Services (Zone II)		38,627	32,493		6,000	6,000
PO AMRO-121, Malaria Eradication Evaluation Teams	28,739	64,641	64,801	15,300	30,600	30,600
PO AMRO-122, Research and Development of Insecticide Application Equipment	6,300	6,300		5,400	5,400	
PO AMRO-123, Research and Development - Protective Equipment Against Toxic Insecticides						
PO AMRO-125, Seminar on Malaria Eradication Evaluation Techniques						
PO AMRO-130, Seminar on Mass Chemoprophylaxis and Surveillance Techniques in Malaria Eradication		1,400			1,200	
PO AMRO-132, Operational Assistance to Country Projects in Malaria Eradication						
PO AMRO-134, Training Center for Malaria Eradication (Kingston)	52,619	57,828	56,255	4,936	4,936	4,936
PO AMRO-135, Malaria Eradication Trainees	54,200	41,200	28,800			
PO AMRO-137, Training Center for Malaria Eradication (Sao Paulo)	4,871	2,800	2,800	2,400	2,400	2,400

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
70,420	55,850	75,073	320,078	345,060	463,390	61,701	57,430	60,330	1,328,724	1,655,000	2,027,511
513,670	449,249	488,576	221,952	158,150	97,304	650,935	987,925	922,098	3,566,487	4,240,942	4,214,575
44,086	29,202	20,127	228,145	267,240	275,420	19,738	20,248	20,498	877,880	943,025	966,361
40,013	38,460	37,791	35,956	34,155	38,455	15,000	15,000	15,000	1,066,100	918,000	918,000
668,189	572,761	621,567	806,131	804,605	874,569	747,374	1,080,603	1,017,926	6,839,191	7,756,967	8,126,447
8,300	7,800	7,800	10,000	10,000	10,000				18,300	17,800	17,800
7,500	7,500	7,500	26,066	7,658	3,929				87,691	74,283	67,399
									12,883	14,566	12,693
80,794	39,144	75,394	20,000	20,000	20,000				116,719	72,656	111,893
7,361	15,111	15,111	7,100	2,330					63,162	75,752	67,400
11,000	11,000	11,000	3,000						19,200	16,200	16,200
871	871	871	2,679						22,719	25,164	28,589
46,000	46,000	46,000	19,725	4,926	4,926				176,187	161,657	170,569
3,512	2,000	2,000	5,424	836	418				42,344	39,798	41,829
2,200			2,600	1,300	1,300	425	425	425	29,185	24,349	27,038
6,765	16,015	16,015	11,811	4,358					59,865	69,897	64,203
									60,220	75,016	71,689
11,700	9,000	9,000	7,688	1,606		7,680			23,211	13,501	12,644
									67,562	57,700	58,989
									7,691		
11,000	11,000	11,000	6,208	3,635	264				41,652	65,702	68,575
						117,300			21,786		
6,000	6,000	6,000	3,411	2,154					215,477	127,391	141,318
									1,360		
									30,288	57,246	53,322
1,650	8,102	8,102	7,160	2,335					18,803		
36,500	36,500	36,500	3,000	3,000	3,000	26,212	4,370		58,467	57,652	62,634
						720	720	720	26,212	4,370	
									50,459	51,164	50,919
									58,563	45,869	42,835
5,000	5,000	5,000	4,137	3,335					53,624	58,362	56,107
8,150	8,150	8,150	4,172	4,072	4,072				33,915	64,723	65,533
									22,568		
3,600	3,600	7,500	4,300	4,300	4,300				16,716	51,257	56,800
									19,220		
41,075	38,075	38,075	15,213	9,114	9,114				119,127	116,985	122,712
									24,359	21,791	22,397
4,115	1,040	1,040	3,700						34,784	30,871	31,700
29,190	31,430	32,600	3,600	1,800					32,790	33,230	32,600
7,000	1,500	1,500							25,710	20,491	21,131
500						100					
8,780	5,700	5,700				1,120	1,120	1,120	30,947		
						32,020	32,020	32,020	134,287	158,758	161,647
3,895	2,540	1,550				4,700	4,700	4,700	49,839	51,671	50,312
406	363	363							111,834	109,298	119,198
									95,045	107,573	113,228
									80,168	82,892	91,139
									44,627	38,493	38,493
									44,039	95,241	95,401
3,300	3,300								15,000	15,000	
2,550			19,450			20,000	35,000		20,000	35,000	
						3,000			25,000		
	2,000			33,825			3,500			41,925	
11,730	6,450	4,450				200,000	583,000	583,000	200,000	583,000	583,000
						8,150	7,190	7,190	77,435	76,404	72,831
									54,200	41,200	28,800
3,000						4,643	8,586	8,657	14,914	13,786	13,857

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

MALARIA (continued)

PO AMRO-138, Studies on Malaria Chemotherapy
PO AMRO-139, Malaria Technical Advisory Services (Zones V and VI)
PO AMRO-196, Insecticide Testing Team
PO AMRO-197, Research on Resistance of Anophelines to Insecticides
PO AMRO-199, Anopheline Susceptibility Testing
Contingency Reserve Fund - Special Malaria Fund

Total - Malaria

TUBERCULOSIS

PR Argentina-20, Tuberculosis Control
PR Dominican Republic-10, BCG Vaccination
PR Guatemala-11, Tuberculosis Control
TA Guatemala-11, Tuberculosis Control
PR Peru-29, Tuberculosis Control
WR AMRO-110, Tuberculosis Prevention

Total - Tuberculosis

VENEREAL DISEASES AND TREPONEMATOSES

PR Dominican Republic-52, Venereal Disease Control
PR Haiti-1, Yaws Eradication
WR Haiti-1, Yaws Eradication
PR Venezuela-13, Treponematoses Eradication
PR AMRO-47, Yaws Eradication and Public Health Laboratory Services (Caribbean)
TA AMRO-47, Yaws Eradication and Public Health Laboratory Services (Caribbean)
PR AMRO-160, Treponematoses Eradication

Total - Venereal Diseases and Treponematoses

ENDEMO-EPIDEMIC DISEASES

PR Argentina-51, Aedes aegypti Eradication
PR British Guiana-7, Filariasis
PR British Guiana and West Indies-1, Aedes aegypti Eradication
TA British Guiana and West Indies-1, Aedes aegypti Eradication
PR Chile-36, Aedes aegypti Eradication
TA Colombia-22, Aedes aegypti Eradication
PR Cuba-1, Aedes aegypti Eradication
PR Dominican Republic-8, Aedes aegypti Eradication
TA Dominican Republic-8, Aedes aegypti Eradication
TA French Antilles and Guiana-2, Aedes aegypti Eradication
TA Haiti-14, Aedes aegypti Eradication
PR Mexico-26, Aedes aegypti Eradication
PR Peru-54, Typhus Vaccine
PR Surinam and Netherlands Antilles-1, Aedes aegypti Eradication
TA Surinam and Netherlands Antilles-1, Aedes aegypti Eradication
PR Uruguay-9, Chagas Disease
WR Venezuela-5, Onchocerciasis Investigation
PR Venezuela-11, Plague Investigation
PR Venezuela-16, Aedes aegypti Eradication
TA AMRO-7, Aedes aegypti Eradication (Central America and Panama)
TA AMRO-8, Aedes aegypti Eradication (Caribbean)
WR AMRO-26, Brucellosis Control
PR AMRO-74, Plague Investigation
PR AMRO-81, Pan American Zoonoses Center
PO AMRO-81, Pan American Zoonoses Center
TA AMRO-81, Pan American Zoonoses Center
PR AMRO-88, Aedes aegypti Eradication
PR AMRO-155, Schistosomiasis Control

Total - Endemo-Epidemic Diseases

PERSONNEL COSTS			DUTY TRAVEL		
1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$
13,021	14,609	13,611	2,765	2,765	2,765
57,085	127,289	122,854	13,400	23,400	23,400
1,469,554	1,678,075	1,712,373	292,286	365,400	358,305
4,200	17,718	26,733	3,600	4,800	6,800
14,775	4,200	14,853	1,370	3,600	1,800
	20,543			1,800	
	43,485	46,513		12,000	10,000
18,975	85,946	88,099	4,970	22,200	18,600
29,304	28,650	30,443	1,800	1,800	1,800
13,456	35,101	14,539	3,120	5,720	1,120
27,201			10,920		
	1,400	14,222		1,200	1,500
7,844			2,600		
11,411	10,110	11,118	1,300	2,900	2,900
4,200	2,800	2,800	3,600	2,400	2,400
93,416	78,061	73,122	23,340	14,020	9,720
45,144	34,762	34,968	3,600	3,860	5,360
			1,210		
54,671	53,163	48,110	1,058	2,180	2,180
5,974	5,885		1,750		
19,403			1,766		
20,342	30,510	26,759	2,250	6,600	6,600
23,753	16,665	23,026	2,400	2,400	2,400
8,183	8,136	7,076	494	494	494
1,737					
1,500		18,173	3,100		1,035
	1,400			1,200	
	7,677	7,342		850	850
7,231	5,690	5,784	3,429	1,710	1,710
		1,400			1,200
710			1,200		
6,860			627		
50,632	57,561	57,917	3,924	15,000	15,000
39,033			11,639		
20,081	18,513	20,613	4,000	4,000	4,000
900			1,200		
		700			2,070
22,041	18,880	23,964	900	3,390	2,550
26,162	40,284	39,543	280	1,280	1,280
30,186	32,097	33,406	1,680	1,600	1,610
13,907	22,595	18,425	3,860	12,960	7,560
	2,100	2,100		1,800	1,800
398,450	355,918	369,306	50,367	59,324	57,699

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
						55,000			55,000		
10,160	4,000	4,000				2,500	2,500	2,500	15,786	17,374	16,376
16,000	18,000	20,000				10,000	20,000	20,000	83,145	157,189	152,754
									10,000	20,000	20,000
							100,000	100,000	16,000	18,000	20,000
										100,000	100,000
399,604	347,191	382,221	190,444	120,584	61,323	493,570	803,131	760,332	2,845,458	3,314,381	3,274,554
					5,000				7,800	22,518	38,533
										7,800	
	232	1,000			5,000				16,145	22,343	16,653
					10,070					55,717	5,000
	232	1,000			20,070						67,583
									23,945	108,378	127,769
8									31,112	30,450	32,243
									16,576	40,821	15,659
									38,121		
										2,600	15,722
									10,444		
									12,711	13,010	14,018
									7,800	5,200	5,200
8									116,764	92,081	82,842
3,000									51,744	38,622	40,328
		3,500							1,210		
5,000											3,500
									55,729	55,343	50,290
									12,724	5,885	
20,000	10,000	10,000							21,169		
7,200									42,592	47,110	43,359
1,330									7,200		
									26,153	19,065	25,426
									10,007	8,630	7,570
									1,737		
									4,600		19,208
										2,600	
										8,527	8,192
									10,660	7,400	7,494
					2,500						5,100
									1,910		
									7,487		
50						46			54,602	72,561	72,917
									50,722		
700									24,081	22,513	24,613
									2,800		
5,000	5,200	1,700			6,770						11,240
4,735	11,000	4,500				5,650	3,000	5,500	33,591	30,470	36,514
		11,000	12,500			48,747	52,230	31,150	a) 92,424	b) 104,794	b) 82,973
2,724	10,000	21,700	3,500								
									31,866	33,697	35,016
									23,991	45,555	47,685
										3,900	3,900
49,739	36,200	52,400	16,000		9,270	54,443	55,230	36,650	568,999	506,672	525,325

a) Made up of contributions from the Government of Argentina, OAS/TA, Cyanamid International and E. R. Squibb & Sons.

b) Made up of contributions from the Government of Argentina and OAS/TA.

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

	PERSONNEL COSTS			DUTY TRAVEL		
	1959	1960	1961	1959	1960	1961
	\$	\$	\$	\$	\$	\$
VIRUS DISEASES						
PO Argentina-2, Smallpox Eradication						
WR Argentina-11, Rabies Control	1,200	600		1,400	700	
TA Brazil-8, National Virus Laboratory Services	4,561	8,632	9,391			
PR Brazil-38, Smallpox Eradication						
PO Brazil-38, Smallpox Eradication						
WR Brazil-42, Rabies Control		1,200	1,200		1,400	1,400
PR Brazil-51, Yellow Fever Laboratory	1,390	1,104	1,104			
PR Colombia-17, Smallpox Eradication	13,807	10,490	11,848	3,094	2,389	2,389
TA Colombia-17, Smallpox Eradication						
PR Colombia-52, Yellow Fever, Carlos Finlay Institute						
PR Ecuador-20, Smallpox Eradication	10,148	10,553	11,912	1,676	2,208	2,208
PR AMRO-57, Yellow Fever Studies	100	1,400	1,400		1,200	1,200
PR AMRO-60, Smallpox Eradication	2,100	2,100	2,100	1,800	1,800	1,800
WR AMRO-61, Rabies Control	13,749	1,200	1,200	4,000	1,400	1,400
PR AMRO-92, Poliomyelitis	19,349	13,460	17,588	5,244	2,700	2,700
PO AMRO-181, Live Poliovirus Vaccine Studies	31,322	32,278	28,204	7,000		
PO AMRO-200, Conference on Live Poliovirus Vaccines						
Total - Virus Diseases	97,726	83,017	85,947	24,214	13,797	13,097
LEPROSY						
PR Bolivia-12, Leprosy Control		1,400			1,200	
PR Brazil-48, Leprosy Control		1,400	1,400		1,200	1,200
TA Colombia-19, Leprosy Control	8,725	9,248	10,606	932	2,209	2,025
PR Ecuador-18, Leprosy Control		1,400			1,200	
WR Paraguay-9, Leprosy Control	6,326	10,234	10,993	240	276	276
WR AMRO-149, Leprosy Control	8,217	1,800	1,800	9,450	2,100	2,100
PR AMRO-202, Leprosy Control (Zone III)		8,210	11,950		1,700	3,350
Total - Leprosy	23,268	33,692	36,749	10,622	9,885	8,951
PUBLIC HEALTH ADMINISTRATION						
WR Argentina-4, National Institute of Microbiology		30,898	33,174		1,000	1,000
PR Argentina-7, Public Health Services			36,689			835
TA Argentina-7, Public Health Services	35,483	43,324	42,638	1,239	390	390
PR Argentina-13, PAHO Public Health Administration Fellowships						
WR Argentina-17, School of Public Health	7,795	14,200	14,959	1,400	425	425
PR Argentina-24, Planning and Organization of Hospital Services	11,935	12,178	13,015	700	1,100	1,100
PR Bolivia-10, Public Health Services	12,500	14,448	12,029	1,000	1,000	1,000
TA Bolivia-11, Joint Field Mission on Indigenous Populations	9,107	10,136	11,823	1,508	1,500	2,221
TA Bolivia-13, WHO/TA Public Health Administration Fellowships						
WR Brazil-3, Public Health Services (Northeast)		11,255	10,863		855	855
WR Brazil-18, National Food and Drug Service		1,800	1,800		2,100	2,100
WR Brazil-19, School of Public Health (Rio de Janeiro)	16,121	1,200	1,200	300	1,400	1,400
PR Brazil-28, PAHO Public Health Administration Fellowships						
PR Brazil-33, Training for Laboratory Technicians		10,021	10,490			
WR Brazil-35, School of Public Health (Sao Paulo)	1,200	1,200	1,200	1,400	1,400	1,400
PR Brazil-39, Public Health Services (Mato Grosso)	7,300	21,195	23,884	700	2,500	2,500
PR Brazil-44, Teaching of Public Health in Schools of Veterinary Medicine						
WR British Guiana-10, Public Health Services		11,255	10,863		400	400
PR British Guiana and West Indies-4, PAHO Public Health Administration Fellowships						
WR British Honduras-5, Public Health Services	5,560	19,981	20,319	740	1,940	2,740
PR British Honduras-6, PAHO Public Health Administration Fellowships						
WR Canada-1, WHO Public Health Administration Fellowships						
WR Canada-2, Consultants in Specialized Fields of Public Health	280	1,200	1,200	480	1,400	1,400
TA Chile-18, WHO/TA Public Health Administration Fellowships						

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
2,600									a) 2,600		
	5,000	5,000	2,325						2,600	1,300	
			3,220	2,000	2,000				6,886	13,632	14,391
4,540									3,220	2,000	2,000
									a) 4,540		
	4,800		1,835	1,650	1,000				1,835	9,050	3,600
5,000	5,000	5,000							6,390	6,104	6,104
1,500									18,401	12,879	14,237
20,000									20,000		
						31,600	31,600	31,600	31,600	31,600	31,600
2,000				1,250					13,824	14,011	14,120
							5,000	5,000	100	7,600	7,600
500	500	1,300			15,470	1,500	1,500	1,500	5,400	5,400	22,170
	1,000	500							18,249	3,100	3,100
		1,000	13,745	8,600	8,600	1,000			39,338	25,760	29,888
10,000						1,000	47,636	47,636	b) 49,322	b) 79,914	b) 75,840
						25,000			c) 25,000		
46,140	16,300	12,800	21,125	13,500	27,070	60,100	85,736	85,736	249,305	212,350	224,650
										2,600	
										2,600	2,600
1,576									9,657	11,457	12,631
										2,600	
300				6,100	6,100				8,142	10,510	11,269
				1,920	1,425				17,967	10,000	10,000
										11,830	16,725
1,876				8,020	7,525				35,766	51,597	53,225
			10,765	4,300	4,300				10,765	36,198	38,474
					8,600						46,124
			8,600	8,600	8,600				36,722	43,714	43,028
	2,000		4,300	4,300	4,300				8,600	8,600	8,600
									13,495	20,925	19,684
			4,300	4,300	4,300				16,935	17,578	18,415
			8,600	4,300	4,300				22,100	19,748	17,329
			745	4,300	4,300				10,615	11,636	14,044
				8,600	8,600				745	4,300	4,300
										20,710	20,318
			2,375	6,000	6,000				2,375	9,900	9,900
			4,000	4,300	4,300				20,421	6,900	6,900
			8,600	4,300	8,600				8,600	4,300	8,600
6,000	2,000	2,000	2,000	5,000	5,000					12,021	12,490
	6,000	6,000							10,600	13,600	13,600
1,200			3,100	6,000	6,000				12,300	29,695	32,384
				4,300	4,300					4,300	4,300
										11,655	11,263
			4,300	4,300	4,300				4,300	4,300	4,300
			6,440	4,300	4,300				12,740	26,221	27,359
			4,300						4,300		
			6,500	6,500	6,500				6,500	6,500	6,500
									760	2,600	2,600
			14,423	6,300	6,300				14,423	6,300	6,300

a) PAHO Special Appropriation.

b) Grant from American Cyanamid Co.

c) Grant from Sister Elizabeth Kenny Foundation.

ESTIMA

PUBLIC HEALTH ADMINISTRATION (continued)						
TA Chile-19, Food and Drug Control						
PR Chile-26, PAHO Public Health Administration Fellowships						
PR Chile-27, Public Health Services (Ovalle-Copiapó)	2,800	1,400	2,800	2,400	1,200	2,400
PR Chile-30, Training for Laboratory Technicians			1,400			1,200
WR Chile-31, School of Public Health	2,800	2,400	2,400	2,400	3,800	3,800
TA Colombia-4, Public Health Services	57,138	57,280	57,793	5,127	5,250	6,561
WR Colombia-18, WHO Public Health Administration Fellowships						
PR Colombia-21, PAHO Public Health Administration Fellowships						
WR Colombia-24, School of Public Health	7,176		1,200			1,400
PR Costa Rica-14, Expansion of Local Public Health Services						
PR Costa Rica-15, PAHO Public Health Administration Fellowships						
PR Costa Rica-20, Planning and Organization of Hospital Services						
PR Cuba-3, Public Health Services	4,835			4,500		
TA Cuba-3, Public Health Services		27,063	32,796		1,500	1,500
PR Cuba-6, PAHO Public Health Administration Fellowships						
PR Dominican Republic-4, Public Health Services	49,128	52,694	60,242	2,400	2,400	2,400
PR Dominican Republic-11, PAHO Public Health Administration Fellowships						
WR Ecuador-4, Public Health Services	15,268	30,076	13,267	2,200	2,831	2,831
PR Ecuador-11, National Institute of Health	6,710	10,490	11,848	400	369	369
PR Ecuador-19, PAHO Public Health Administration Fellowships						
TA El Salvador-5, Health Demonstration Area	23,591	19,058		2,100	2,101	
PR El Salvador-9, PAHO Public Health Administration Fellowships						
PR El Salvador-10, Planning and Organization of Hospital Services	6,921	11,227		1,100	1,368	
PR French Antilles and Guiana-3, PAHO Public Health Administration Fellowships						
WR Guatemala-8, Public Health Services	45,838	56,577	59,610	1,550	1,425	3,750
PR Guatemala-12, PAHO Public Health Administration Fellowships						
PR Haiti-9, Public Health Laboratory	5,863	10,990	12,248			
PR Haiti-12, PAHO Public Health Administration Fellowships						
PR Haiti-16, Public Health Services		10,596	10,888		780	780
TA Haiti-16, Public Health Services	12,355	19,961	17,343	780	1,690	1,690
PR Honduras-4, Public Health Services	11,918			1,000		
TA Honduras-4, Public Health Services	42,049	49,542	38,462	1,975	2,041	2,041
PR Honduras-6, PAHO Public Health Administration Fellowships						
WR Jamaica-11, Public Health Training Station	1,592	1,200	2,400	808	1,400	2,800
PR Mexico-15, State Health Services	5,087	9,265	10,595	600	1,600	1,600
WR Mexico-22, Public Health Services (Guanajuato)	52,700	56,593	56,505	2,600	2,600	2,600
PR Mexico-25, PAHO Public Health Administration Fellowships						
PR Mexico-28, Public Health Laboratory	2,100	2,100	2,100	1,800	1,800	1,800
WR Mexico-30, School of Public Health	8,361	10,391	11,120	720	2,120	2,120
WR Mexico-34, Veterinary Medicine Education	1,410	1,200	1,200	1,200	1,400	1,400
PR Nicaragua-7, PAHO Public Health Administration Fellowships						
TA Panama-1, Public Health Services	56,876	40,928	43,845	4,220	4,000	4,000
PR Panama-8, PAHO Public Health Administration Fellowships						
PR Paraguay-10, Public Health Services		11,720	19,675		250	250
TA Paraguay-10, Public Health Services	48,835	53,796	51,218	2,640	2,520	3,700
PR Paraguay-13, PAHO Public Health Administration Fellowships						
PR Paraguay-16, Administrative Methods and Practices in Public Health	10,771			310		
TA Peru-22, Public Health Services	35,019	32,592	33,303	2,712	1,350	3,399
TA Peru-23, Joint Field Mission on Indigenous Population				1,000	1,000	1,000
PR Peru-25, PAHO Public Health Administration Fellowships						
PR Peru-26, Public Health Orientation Course	2,828	2,800	2,800	2,400	2,400	2,400
WR Peru-28, Veterinary Medicine Education	1,630			1,960		
PR Surinam and Netherlands Antilles-2, PAHO Public Health Administration Fellowships						
WR Trinidad-6, Public Health Legislation	540			1,579		
WR United States-7, WHO Public Health Administration Fellowships						
WR United States-10, Consultants in Specialized Fields of Public Health	5,400	5,400	5,400	6,300	6,300	6,300
PR United States-11, PAHO Public Health Administration Fellowships						
TA Uruguay-5, Public Health Services	37,105	36,779	35,618	1,100	1,100	1,100
PR Uruguay-10, PAHO Public Health Administration Fellowships						

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	1,460	791		4,300	4,300					5,760	5,091
	2,600		4,300	4,300	4,300				4,300	4,300	4,300
									5,200	5,200	5,200
1,000			5,000	5,000	5,500					2,600	2,600
5,040	10,000	10,000							11,200	11,200	11,700
									67,305	72,530	74,354
			2,866	12,900	4,300					4,300	4,300
			4,300	8,600	4,300				2,866	12,900	
			4,300		4,300				7,176		6,900
			4,300		4,300				4,300	8,600	4,300
					4,300				4,300		4,300
									9,335		
			4,300	12,900	8,600				4,300	28,563	34,296
										12,900	8,600
1,000	50	50	8,600	4,300	4,300				61,128	59,444	66,992
			4,300						4,300		
			8,450		8,600				25,918	32,907	24,698
				4,300					7,110	15,159	12,217
			2,866		8,600				2,866		8,600
			4,300	4,300	4,300				25,691	21,159	
									4,300	4,300	4,300
									8,021	12,595	
1,000			4,300	4,300	4,300				4,300	4,300	4,300
			4,300						52,688	58,002	63,360
			4,300	4,300	4,300				4,300	4,300	4,300
			4,300	4,300	4,300				5,863	10,990	12,248
			4,300	4,300	4,300				4,300	4,300	
	14,000	14,000		2,900					14,276		11,668
									13,135	35,651	33,033
									12,918		
			4,300	8,600	4,300				44,024	51,583	40,503
									4,300	8,600	4,300
			3,770	3,770	3,770				2,400	2,600	5,200
									9,457	14,635	15,965
100	100	100		4,300					55,400	63,593	59,205
			4,300	4,300	4,300				4,300	4,300	4,300
750	750	750	1,525	1,525	1,525				6,175	6,175	6,175
3,100			3,000	3,000	3,000				15,181	15,511	16,240
			5,300	4,300	4,300				7,910	6,900	6,900
			4,300	4,300	4,300				4,300	4,300	4,300
3,240	3,000	3,000	4,300	4,300	4,300				64,336	47,928	50,845
			4,300	4,300	4,300				4,300	4,300	4,300
										11,970	19,925
			4,300	4,300	4,300				51,475	56,316	54,918
									4,300	4,300	4,300
									11,081		
									37,731	33,942	36,702
			2,868	4,300	4,300				1,000	1,000	1,000
1,000		300	8,600						2,868		4,300
									14,828	5,200	5,500
									3,590		
			4,300	4,300	4,300				4,300	4,300	4,300
			10,000	10,000	10,000				2,119		
									10,000	10,000	10,000
									11,700	11,700	11,700
			7,500	15,000	15,000				7,500	15,000	15,000
			4,300	4,300	4,300				38,205	37,879	36,718
									4,300	4,300	4,300

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

	PERSONNEL COSTS			DUTY TRAVEL		
	1959	1960	1961	1959	1960	1961
	\$	\$	\$	\$	\$	\$
PUBLIC HEALTH ADMINISTRATION (continued)						
PR Uruguay-13, Training of Public Health Personnel	4,900	16,651	17,645	100	500	500
TA Venezuela-1, Local Health Services	2,191					
PR Venezuela-9, PAHO Public Health Administration Fellowships			4,200			3,600
PR Venezuela-18, National Institute of Hygiene			1,800	2,323	2,100	2,100
WR Venezuela-19, School of Public Health	367	1,800	1,800			
WR AMRO-16, Assistance to Schools of Public Health	3,529	1,200		5,871	1,400	
WR AMRO-45, Laboratory Services	3,933	3,600	3,600	274	4,200	4,200
WR AMRO-48, Seminar on Teaching of Public Health in Schools of Veterinary Medicine	1,200			1,400		
WR AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine	2,694	1,200	1,200	3,573	1,400	1,400
WR AMRO-76, Vaccine Testing						
PR AMRO-106, Seminar on Public Health Administration			1,400			1,200
PR AMRO-148, Laboratory for Production of Biologicals (Zone III)	6,331	12,015	13,375	1,710	2,828	944
PR AMRO-150, Food and Drug Services	10,500	22,730	25,475	9,000	7,000	12,000
PR AMRO-152, Conference of Directors of Schools of Public Health	2,400		2,100	1,375		1,800
PR AMRO-162, Epidemiology (Zone II)		10,308	10,890		3,000	3,000
PR AMRO-163, Epidemiology (Zone VI)	14,701	13,060	15,847	1,560	2,345	2,345
PR AMRO-178, Veterinary Public Health (Zone II)	14,130	12,971	14,714	2,180	2,180	2,180
PR AMRO-179, Veterinary Public Health (Zone IV)	13,360	16,134	12,386	2,500	2,500	2,500
PR AMRO-185, Hospital Planning and Organization	3,675	10,095	13,403	450	4,930	4,930
WR AMRO-188, Veterinary Public Health (Zone III)	12,550	12,233	14,021	3,000	2,600	2,600
WR AMRO-189, Veterinary Public Health (Zone V)	14,838	11,659	15,452	2,001	2,000	2,000
PR AMRO-198, Administrative Methods and Practices in Public Health	2,800	13,228	14,621	2,400	4,000	4,000
PR AMRO-203, Epidemiology (Zone III)			11,165			1,200
PR Field Office - El Paso	35,474	49,787	55,663	4,555	8,555	8,845
Total - Public Health Administration	821,498	1,037,080	1,093,179	112,820	125,543	146,301
DENTAL HEALTH						
PR Brazil-37, Dental Health Education						
PO Brazil-37, Dental Health Education						
PR Brazil-43, Preventive Dentistry		1,400	1,400		1,200	1,200
PR AMRO-72, Dental Health	12,839	13,319	12,712	4,400	4,800	6,150
Total - Dental Health	12,839	14,719	14,112	4,400	6,000	7,350
VITAL AND HEALTH STATISTICS						
TA AMRO-10, Inter-American Program for Education in Biostatistics	3,600			4,200		
WR AMRO-85, Latin American Center for Classification of Diseases						
WR AMRO-86, Health Statistics (Zone III)	12,165	13,699	12,335	3,195	3,000	3,195
PR AMRO-98, Working Group on Medical Certification				490		
WR AMRO-143, Health Statistics (Zone IV)	5,459	10,300	11,058	1,250	3,000	3,000
WR AMRO-144, Health Statistics (Zone II)	12,239	17,607	13,100	3,000	3,000	3,000
PR AMRO-156, Latin American Training Program in Hospital Statistics		6,750	18,993		1,000	4,000
PR AMRO-157, Health Statistics (Zone I)	8,333	10,924	12,183	1,500	2,250	2,250
PR AMRO-159, Health Statistics (Zone VI)	5,702	10,022	10,490	800	1,800	1,800
PR AMRO-201, Health Statistics (Zone V)	1,264	10,020	10,295	1,613	250	250
Total - Vital and Health Statistics	48,762	79,322	88,454	16,048	14,300	17,495
NURSING						
TA Argentina-3, Nursing Education (Cordoba and El Chaco)	32,762	33,069	31,903	2,400	300	860
PR Argentina-23, Nursing Education (Rosario)	15,792	17,188	16,750	200	760	890
PR Argentina-25, Training of Professional and Auxiliary Nursing Personnel		8,901	8,974		700	1,000
WR Bolivia-5, Nursing Education	14,725	9,081	10,329	732	362	362
PR British Guiana and West Indies-3, Public Health Nursing	2,730			1,400		
TA British Guiana and West Indies-3, Public Health Nursing	3,233	6,232	7,752	1,009	1,150	1,150
WR Chile-29, Advanced Nursing Education	12,330	10,031	11,788	500	880	880
TA Chile-34, Training of Nursing Auxiliaries		7,440	8,171		500	500
PR Costa Rica-18, Advanced Nursing Education		11,016	10,246		2,100	300
WR Cuba-4, Nursing Education		10,100	10,830		950	450

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	1,000		8,600	4,300	4,300				13,600	22,451	22,445
			4,300	4,300	4,300				2,191		
									4,300	4,300	4,300
	1,000			4,300	4,300				2,690	9,200	8,200
				4,300					8,600	6,900	
1,000	1,000	1,000		8,600	8,600				5,207	17,400	17,400
3,000			17,500						23,100		
				4,300	4,300				6,267	6,900	6,900
						4,738	5,248	5,248	4,738	5,248	5,248
		1,000			14,400			500			18,500
	3,000	7,500	8,600	8,600	4,300				16,641	26,443	26,119
1,000	1,500		8,020	8,020	8,600	5,000	3,000	5,000	32,520	42,250	51,075
	100	750	6,610		9,000			250	11,385		13,900
		100								13,408	13,990
									16,261	15,405	18,192
									16,310	15,151	16,894
									15,860	18,634	14,886
					8,600				4,125	15,025	26,933
500	420	420							16,050	15,253	17,041
									16,839	13,659	17,452
					4,300				5,200	17,228	22,921
						8,550	12,380	8,430	48,579	70,722	12,365
28,930	49,980	47,761	290,423	294,015	324,195	18,288	20,628	19,428	1,271,959	1,527,246	1,630,864
3,000									3,000		
6,000									a) 6,000		
	2,000		19,600	13,723	14,000				36,839	4,600	2,600
										31,842	32,862
9,000	2,000		19,600	13,723	14,000				45,839	36,442	35,462
			18,463	14,955	19,255	15,000	15,000	15,000	41,263	29,955	34,255
			7,000	7,000	7,000	15,000	15,000	15,000	22,000	22,000	22,000
700									15,360	16,699	15,530
						300			1,490		
									6,709	13,300	14,058
100	100	100							15,339	20,707	16,200
	2,500	1,000			8,600					10,250	32,593
									9,833	13,174	14,433
					4,300				6,502	11,822	12,290
									2,877	10,270	14,845
800	2,600	1,100	25,463	21,955	39,155	30,300	30,000	30,000	121,373	148,177	176,204
33									35,195	33,369	32,763
1,938	1,500	1,500	4,300	8,600	8,600				22,230	28,048	27,740
		1,000		4,300	4,300					13,901	15,274
2,000				4,300	4,300				17,457	13,743	14,991
									4,130		
									4,242	7,382	8,902
1,000	500	500	4,300	4,300	4,300				18,130	15,711	17,468
										7,940	8,671
	650	550	8,600	4,300	4,300				8,600	18,066	15,396
	500	500		2,000						13,550	11,780

a) Grant from the W. K. Kellogg Foundation.

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

	PERSONNEL COSTS			DUTY TRAVEL		
	1959	1960	1961	1959	1960	1961
	\$	\$	\$	\$	\$	\$
NURSING (continued)						
WR Dominican Republic-3, Nursing Education	15,390	18,872	19,449	1,680	1,680	1,680
WR Ecuador-16, Nursing Education	14,588	15,973	15,732	689	370	370
TA El Salvador-11, National Public Health Nursing Services			9,194			225
PR Guatemala-6, Training of Nursing Auxiliaries						
WR Guatemala-6, Training of Nursing Auxiliaries	17,709			320		
TA Guatemala-6, Training of Nursing Auxiliaries		7,983	8,496		620	620
PR Jamaica-12, Nursing Education		8,200	9,681			
WR Jamaica-12, Nursing Education	4,740					
PR Mexico-14, Nursing Education	8,142	9,293	8,608	720	720	720
WR Nicaragua-5, Nursing Education	19,041	20,886	28,588	1,000	1,110	1,110
WR Peru-15, Nursing Education	6,050	8,725	9,455	1,430	500	500
PR Venezuela-14, Nursing Education						
TA Venezuela-14, Nursing Education	10,954	10,228	11,237		1,500	1,500
WR AMRO-23.5, Fifth Regional Nursing Congress				7,300		
WR AMRO-28, Advanced Nursing Education						
WR AMRO-46, Seminar on Nursing Education		1,200	1,200		4,400	4,430
WR AMRO-63, Assistance to Schools of Nursing			1,800			2,100
WR AMRO-100, Courses on Nursing Supervision and Administration	16,324	2,400	2,400	2,800	2,800	2,800
PR AMRO-212, Seminar on Teaching of Nursing Auxiliaries			1,400			4,210
PR AMRO-213, Seminar on Public Health Nursing Services			1,400			1,200
Total - Nursing	194,510	216,818	245,383	22,180	21,402	27,857
SOCIAL AND OCCUPATIONAL HEALTH						
PR Argentina-26, National Institute of Rehabilitation	1,347	1,400	2,100		1,200	1,800
TA Brazil-31, Rehabilitation Training Center	9,639	10,181	9,469	85	430	430
PR Chile-21, Rehabilitation Center		2,800	10,021		2,400	
PR Chile-22, Institute of Occupational Health	4,200	4,200		3,600	3,600	
Total - Social and Occupational Health	15,186	18,581	21,590	3,685	7,630	2,230
HEALTH EDUCATION OF THE PUBLIC						
PR AMRO-29, Cultural Anthropology			13,265			6,915
WR AMRO-93, Health Education (Zone II)	13,866	14,538	13,855	3,000	3,000	3,000
PR AMRO-112, Fundamental Education Training Center (CREPAL)	2,738	7,585	10,315	382	360	1,800
WR AMRO-141, Health Education (Zone III)	5,342	11,759	12,518	1,000	2,500	2,500
Total - Health Education of the Public	21,946	33,882	49,953	4,382	5,860	14,215
MATERNAL AND CHILD HEALTH						
PR Brazil-34, Seminar on Diarrheal Diseases	1,400			1,200		
WR Chile-20, Midwifery Education	9,518	8,677	10,136	350	880	880
PR AMRO-94, Diarrheal Diseases in Childhood	28,058	8,400	15,400	3,100	7,200	13,200
WR AMRO-102, Pediatric Education			1,200			1,400
PR AMRO-183, Nursing Midwifery			10,020			3,000
Total - Maternal and Child Health	38,976	17,077	36,756	4,650	8,080	18,480
MENTAL HEALTH						
PR Argentina-27, Training of Personnel for Mental Health Programs		11,001	10,374		2,150	1,550
WR Venezuela-2, Mental Health	1,220			1,150		
PR AMRO-158, Mental Health		12,172	11,360		2,500	5,000
Total - Mental Health	1,220	23,173	21,734	1,150	4,650	6,550
NUTRITION						
PR Argentina-15, Nutrition		2,800	2,800		2,400	2,400
PR Chile-35, Nutrition						
TA Ecuador-53, National Institute of Nutrition	12,355	13,744	10,660	1,352	878	1,477
PR AMRO-54, Collaboration with INCAP	38,738	25,835	28,144	12,608	12,500	12,500
PO AMRO-54, Collaboration with INCAP	296,965	292,782	292,782	8,903	8,778	8,778
PR AMRO-165, Nutrition Advisory Services (Interzone)	20,822	60,440	66,724	6,110	18,540	17,090
PO AMRO-182, Training Course in Dietary and Nutritional Surveys	783	1,400		1,652	4,130	
Total - Nutrition	369,663	397,001	401,110	30,625	47,226	42,245

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

	PERSONNEL COSTS			DUTY TRAVEL		
	1959	1960	1961	1959	1960	1961
	\$	\$	\$	\$	\$	\$
ENVIRONMENTAL SANITATION						
WR Brazil-45, Environmental Sanitation Training	1,763			2,296		
WR Cuba-9, Waterworks Training Course						912
TA El Salvador-12, National Environmental Sanitation Services			10,185			
WR Mexico-35, Environmental Sanitation Training	1,410	1,200	1,200	1,200	1,400	1,400
WR Uruguay-15, Waterworks Operators School		2,400	2,400		2,800	2,800
WR AMRO-1, Environmental Sanitation Training	3,209			3,057		
WR AMRO-17.5, Waterworks Training Course	2,850			1,650		
PR AMRO-39, Environmental Sanitation (Advisory Committee and Consultants)	444					
PR AMRO-95, Environmental Sanitation (Caribbean)	6,536	2,100	2,100	5,654	6,133	6,133
TA AMRO-95, Environmental Sanitation (Caribbean)	22,068	7,342	8,673	1,000	1,000	1,000
		19,682	22,171	3,062	3,730	3,730
PR AMRO-187, Promotion of Urban Water Supplies	4,900	5,600	14,000	4,200	4,800	12,000
WR AMRO-204, Environmental Sanitation Training (Zone I)						
WR AMRO-205, Environmental Sanitation Training (Zone II)						
WR AMRO-206, Environmental Sanitation Training (Zone III)						
WR AMRO-207, Environmental Sanitation Training (Zone IV)						
WR AMRO-208, Environmental Sanitation Training (Zone V)		2,710	2,789		1,157	1,157
WR AMRO-209, Environmental Sanitation Training (Zone VI)						
Total - Environmental Sanitation	43,180	41,034	63,518	22,119	21,020	29,132
EDUCATION AND TRAINING						
WR Argentina-18, Medical Education	1,400	1,200	1,200	1,200	1,400	1,400
PR Chile-37, Medical Education			5,600			4,800
PR Dominican Republic-14, Medical Education						
PR Haiti-19, Medical Education	17,576	21,848	23,265			
TA Haiti-19, Medical Education						
WR Jamaica-4, University College of the West Indies			3,600			4,200
WR Mexico-32, Medical Education	2,400			2,800		
PR Venezuela-17, Medical Education		4,200	2,800		3,600	2,400
WR AMRO-18, Medical Education	3,600	3,600	3,600	4,200	4,200	4,200
PR AMRO-210, Medical Education (Zone VI)			11,423			2,500
PR AMRO-211, Seminar on Teaching of Internal Medicine			2,100			1,800
Total - Education and Training	24,976	30,848	53,588	8,200	9,200	21,300
OTHER PROJECTS						
PR Uruguay-16, Chronic Diseases		2,100	2,100		1,800	1,800
PR Venezuela-15, Health Aspects of Nuclear Energy						
PR Venezuela-20, Public Health Aspects of Accident Prevention				1,480		
PR AMRO-35, Fellowships (Unspecified)						
PR AMRO-142, Health Aspects of Nuclear Energy		4,200	4,200		3,600	3,600
Total - Other Projects		6,300	6,300	1,480	5,400	5,400
PO Pan American Foot-and-Mouth Disease Center	266,647	288,001	312,220	19,167	28,937	43,681
WR Less: Delay Factor for New Projects		(9,421)	(9,716)			
TOTAL - ALL SUBJECTS AND ALL FUNDS	3,960,792	4,509,124	4,763,777	656,705	789,874	848,608

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			GRANTS AND OTHER			T O T A L		
1959	1960	1961	1959	1960	1961	1959	1960	1961	1959	1960	1961
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
			2,000						2,000 4,559		11,097
500									4,610	3,600	3,600
2,000	1,000 1,500	1,000 1,000								6,700	6,200
			47,880 2,700						54,146 8,700		
1,500									6,248	8,233	8,733
150		500							7,536	8,342	9,673
									25,130	23,412	25,901
									9,100	10,400	26,000
				4,000	4,000					4,000	4,000
				8,000	8,000					8,000	8,000
				8,000	8,000					8,000	8,000
				12,000	12,000					12,000	12,000
				4,000	4,000					7,867	7,946
				12,000	12,000					12,000	12,000
4,150	2,500	2,500	52,580	48,000	48,000				122,029	112,554	143,150
		1,000	4,300	8,600	8,600				6,900	11,200	11,200
				4,000						4,000	11,400
7,020			4,300	4,300	4,300				21,876	26,148	27,565
									7,020		
		1,442									9,242
			5,800	4,300	4,300				11,000	4,300	4,300
				4,300	8,600					12,100	13,800
1,000	2,000	2,000	16,000	12,900	12,900				24,800	22,700	22,700
		450			16,000						13,923
											20,350
8,020	2,000	4,892	30,400	38,400	54,700				71,596	80,448	134,480
				2,500	2,500					6,400	6,400
				4,300	4,300					4,300	4,300
			48,978	41,652	64,520				1,480		
			8,000	12,900	12,900				48,978	41,652	64,520
									8,000	20,700	20,700
			56,978	61,352	84,220				58,458	73,052	95,920
61,515	65,985	70,782	8,484	17,472	35,981	46,285	58,174	59,113	a) 402,098	a) 458,569	a) 521,777
										(9,421)	(9,716)
668,189	572,761	621,567	806,131	804,605	874,569	747,374	1,080,603	1,017,926	6,839,191	7,756,967	8,126,447

a) Organization of American States - Technical Assistance.

PAN AMERICAN HEALTH ORGANIZATION						SUMMARY OF PROFESSIONAL AND LOCAL PERSONNEL
REGULAR BUDGET			OTHER FUNDS			
NUMBER OF POSTS			NUMBER OF POSTS			
1959	1960	1961	1959	1960	1961	
						PART I
						<u>PAN AMERICAN HEALTH ORGANIZATION</u>
10 6	10 6	10 6	1	1	1	Professional Local
16	16	16	1	1	1	Total - Part I
						PART II
						<u>PAN AMERICAN HEALTH ORGANIZATION - HEADQUARTERS</u>
59 81	62 84	62 84	6 11	6 11	6 11	Professional Local
140	146	146	17	17	17	Total - Part II
						PART III
						<u>PAN AMERICAN HEALTH ORGANIZATION - FIELD AND OTHER PROGRAMS</u>
						<u>Zone Offices</u>
29 68	31 70	31 70	5	6	6	Professional Local
97	101	101	5	6	6	Total - Zone Offices
						<u>Projects</u>
65	79 1	91 2	139 140	165 153	165 153	Professional Local
65	80	93	279	318	318	Total - Projects
						<u>Total - Zone Offices and Projects - Part III</u>
94 68	110 71	122 72	139 145	165 159	165 159	Professional Local
162	181	194	284	324	324	Total - Part III
						<u>ALL PARTS</u>
163 155	182 161	194 162	146 156	172 170	172 170	Professional Local
318	343	356	302	342	342	Total - PERSONNEL

WORLD HEALTH ORGANIZATION						TOTALS		
REGULAR BUDGET			TECHNICAL ASSISTANCE FUNDS					
NUMBER OF POSTS			NUMBER OF POSTS			NUMBER OF POSTS		
1959	1960	1961	1959	1960	1961	1959	1960	1961
3 1	3 1	3 1	1	1	1	15 7	15 7	15 7
4	4	4	1	1	1	22	22	22
29 25	29 26	29 26	1 9	1 9	1 9	95 126	98 130	98 130
54	55	55	10	10	10	221	228	228
4	4	4				33 73	35 76	35 76
4	4	4				106	111	111
42 1	45 1	46 1	91	77	75	337 141	366 155	377 156
43	46	47	91	77	75	478	521	533
46 1	49 1	50 1	91	77	75	370 214	401 231	412 232
47	50	51	91	77	75	584	632	644
78 27	81 28	82 28	93 9	79 9	77 9	480 347	514 368	525 369
105	109	110	102	88	86	827	882	894

PAN AMERICAN HEALTH ORGANIZATION											PART I		GRADE	
REGULAR BUDGET						OTHER FUNDS					CONFERENCE SERVICES AND ORGANIZATIONAL MEETINGS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$			
SECTION I														
CONFERENCE SERVICES (For text see page 13)														
Conference and Publications Section														
Conference and Publications Officer, .0021													P4	
1	1	1		7,619	7,854								WL6	
1	1	1		3,920	4,080									
Conference Arrangements and Documents														
1	1	1		6,756	6,981								P3	
1	1	1		4,917	5,117	1	1	1		4,917	5,117		P2	
1	1	1		5,000	5,000								P1	
2	2	2		9,630	9,815								WL7	
1	1	1		3,490	3,640								WL5	
Minutes and Translation														
2	2	2		12,694	13,119								P3	
4	4	4		22,284	22,884								P2	
2	2	2		7,379	7,679								WL7	
16	16	16	79,239	83,689	86,169	1	1	1	2,800	4,917	5,117	TOTAL		
SECTION 2														
ORGANIZATIONAL MEETINGS (For text see page 13)														
Ch. 1. Meetings of the Pan American Sanitary Conference, Directing Council, Executive Committee and WHO Regional Committee														
Personal Services														
Travel and Transportation														
Space and Equipment Services														
Other Services														
Administrative Supplies														
Publications														
			51,452	75,959	39,126							TOTAL		
Ch. 2. Meetings of the Executive Committee														
				8,510	8,510									
				4,632	4,632									
				200	200									
				1,500	1,500									
				1,450	1,450									
			16,292	16,292	16,292							TOTAL		
SECTION 3														
TEMPORARY PERSONNEL (For text see page 13)														
Temporary Personnel														
			900	1,350	1,350									

PAN AMERICAN HEALTH ORGANIZATION											PART I		GRADE	
REGULAR BUDGET						OTHER FUNDS					CONFERENCE SERVICES AND ORGANIZATIONAL MEETINGS			
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	SECTION 4		
												COMMON STAFF COSTS (For text see page 13)		
			11,485	12,132	12,491				133	234	243	Ch. 1.	Pension	
			1,784	1,884	1,939				63	111	115	Ch. 2.	Insurance	
			14,229	14,625	14,625				555	950	950	Ch. 3.	Post Adjustment Allowance	
			256	256	256				224	393	409	Ch. 4.	Service Benefit	
			4,600	5,000	5,000				800	800	800	Ch. 5.	Repatriation Grant	
			7,600						3,800			Ch. 6.	Dependents' Allowance	
			2,365	2,495	6,615						1,100	Ch. 7.	Recruitment Costs	
			6,641	6,781	6,901							Ch. 8.	Home Leave Travel	
												Ch. 9.	Reimbursement of Income Tax	
			48,960	43,173	47,827				5,575	2,488	3,617	TOTAL		
											PART II			
											HEADQUARTERS			
												SECTION 1		
												EXECUTIVE OFFICES (For text see page 14)		
												Ch. 1. <u>Office of the Director</u>		
1	1	1		16,000	16,000							Director, .1	Ung	
1	1	1		15,000	15,000							Assistant Director, .2	Ung	
1	1	1		14,000	14,000							Secretary General, .3	Ung	
1	1	1		7,469	7,694	1	1	1	9,100	9,100		Medical Consultant, 9021	Ung	
1	1	1		5,000	5,000							Radiological Health Officer, .299	P4	
2	2	2		10,967	11,172							Administrative Officer, .6	P1	
						1	1	1	4,440	4,600		Secretary, .7, .8	WL8	
												Secretary, 9022	WL6	
				(15,000)	(15,000)							Contribution of WHO		
				53,436	53,866				13,540	13,700		Cost of salaries		
				5,000	5,000							Duty Travel for Executive Offices		
				6,000	6,000							Representation Allowance of the Director		
				200	200							Hospitality		
7	7	7	63,437	64,636	65,066	2	2	2	13,380	13,540	13,700	TOTAL		
												Ch. 2. <u>Library</u>		
1	1	1		8,000	8,000							Librarian, .37	P3	
3	3	3		13,360	13,520							Cataloger, 4.38	P1	
2	2	2		7,267	7,567							Clerk, .39, .41, .42	WL6	
				28,627	29,087							Clerk, .40, .43	WL5	
				6,030	6,030							Cost of salaries		
												Library Acquisitions and Binding		
6	6	6	32,917	34,657	35,117							TOTAL		

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
1	1	1		9,625	9,925							Ch. 3. Information and Publications Branch	P5
1	1	1		9,167	9,417							Chief of Branch, .297	P4
1	1	1		4,747	4,760							Scientific Editor, .290	WL6
1	1	1		4,747	4,760							Secretary, .16	WL6
												Clerk Stenographer, .52	
												<u>Public Information</u>	
1	1	1		5,033	5,233							Information Officer, 4.29	P3
												Information Officer, .0009	P2
1	1	1		4,191	4,376							Information Officer, 4.30	P1
1	1	1		4,160	4,320							Information Assistant, .32	WL7
1	1	1		3,452	3,602							Secretary, .31, 4.1301	WL6
												Clerk Stenographer, .0020	WL5
				8,458	8,458							"World Health"	
												Press Releases	
												World Health Day	
				3,000	3,250							Supplies, Materials and Other Services	
												<u>Periodical Publications and Distribution</u>	
1	1	1		6,494	6,719							Editor, .46	P3
2	2	2		11,583	11,983							Assistant Editor, .47, .48	P2
1	1	1		5,000	5,000							Sub-Editor, .50	P1
1	1	1		5,620	5,620							Administrative Assistant, .51	WL8
2	2	2		9,937	10,030							Clerk, .54, .137	WL6
1	1	1		3,765	3,915							Clerk Stenographer, .55	WL5
1	1	1		3,490	3,640							Clerk Typist, .53	WL5
												<u>Reports</u>	
1	1	1		6,494	6,719							Reports Officer, .293	P3
1	1	1		3,883	4,083							Reports Officer, .5	P1
1	1	1		4,293	4,453							Clerk, .289	WL6
1	1	1		3,515	3,665							Clerk Typist, .11	WL5
												<u>Official Documents and Special Publications</u>	
1	1	1		5,033	5,233							Editor, 4.45	P3
1	1	1		3,800	4,000							Assistant Editor, .0008	P2
1	1	1		4,127	4,277							Sub-Editor, .49	P1
												Clerk Typist, .232	WL5
												<u>Visual Aids</u>	
1	1	1		8,000	8,000							Visual Media Officer, .209	P3
1	1	1		5,483	5,683							Visual Media Officer, .210	P2
1	1	1		5,000	5,000							Photo Editor, .255	P1
3	3	3		16,314	16,792							Visual Media Assistant, .211, .212, .213	WL8
1	1	1		4,595	4,800							Draftsman, .0001	WL8
1	1	1		4,187	4,347							Clerk Stenographer, .214	WL6
				1,500	1,600							Drafting Services	
				2,800	2,800							Photographic Services	
				665	665							Slides and Film Strips	
				5,200	5,600							Exhibits	
32	32	32	180,113	187,358	192,725							TOTAL	

PART II

HEADQUARTERS

Ch. 3. Information and Publications Branch

Chief of Branch, .297
 Scientific Editor, .290
 Secretary, .16
 Clerk Stenographer, .52

P5
 P4
 WL6
 WL6

Public Information

Information Officer, 4.29
 Information Officer, .0009
 Information Officer, 4.30
 Information Assistant, .32
 Secretary, .31, 4.1301
 Clerk Stenographer, .0020

P3
 P2
 P1
 WL7
 WL6
 WL5

"World Health"

Press Releases

World Health Day

Supplies, Materials and Other Services

Periodical Publications and Distribution

Editor, .46
 Assistant Editor, .47, .48
 Sub-Editor, .50
 Administrative Assistant, .51
 Clerk, .54, .137
 Clerk Stenographer, .55
 Clerk Typist, .53

P3
 P2
 P1
 WL8
 WL6
 WL5
 WL5

Reports

Reports Officer, .293
 Reports Officer, .5
 Clerk, .289
 Clerk Typist, .11

P3
 P1
 WL6
 WL5

Official Documents and Special Publications

Editor, 4.45
 Assistant Editor, .0008
 Sub-Editor, .49
 Clerk Typist, .232

P3
 P2
 P1
 WL5

Visual Aids

Visual Media Officer, .209
 Visual Media Officer, .210
 Photo Editor, .255
 Visual Media Assistant, .211, .212, .213
 Draftsman, .0001
 Clerk Stenographer, .214

P3
 P2
 P1
 WL8
 WL8
 WL6

Drafting Services

Photographic Services

Slides and Film Strips

Exhibits

TOTAL

PAN AMERICAN HEALTH ORGANIZATION												PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	SECTION 2		
			\$	\$	\$				\$	\$	\$	DIVISION OF EDUCATION AND TRAINING (For text see page 14)		
												Ch. 1. <u>Office of the Chief</u>		
1	1	1		4,160	4,345							Chief of Division, 4.56		D2
1	1	1		3,490	3,640							Secretary, .58		WL7
												Clerk Stenographer, .59		WL5
				7,650	7,985							Cost of salaries		
				17,545	17,545					405	405	Duty Travel for Division		
2	2	2	19,665	25,195	25,530					405	405	TOTAL		
												Ch. 2. <u>Fellowships Branch</u>		
1	1	1		8,542	8,792							Chief of Branch, 4.69		P5
1	1	1		6,981	7,206	1	1	1		6,200	6,400	Medical Officer, .61		P4
												Nurse, .234		P3
												Training Officer, 9105, 4.294, 4.0500		P3
												Administrative Officer, 4.62		P2
												Budget and Awards Clerk, 4.65		WL8
2	2	2		8,629	8,999	1	1	1		4,160	4,345	Placement Clerk, .243, .0014, 9106,		WL7
1	1	1		5,131	5,270							4.63, 4.0501		WL7
												Statistics Clerk, .66		WL7
												Payments and Travel Clerk, 4.64		WL7
1	1	1		3,880	4,040							Secretary, 4.295		WL6
1	2	2		6,637	7,827							Clerk Stenographer, .0005		WL6
												Clerk, .292, .0034		WL6
												Clerk Stenographer, 4.254		WL5
7	8	8	35,720	39,800	42,134	2	2	2	9,975	10,360	10,745	TOTAL		
												Ch. 3. <u>Professional Education Branch</u>		
1	1	1		9,675	9,975							Chief of Branch, .67		P5
1	1	1		9,208	9,458							Medical Officer, 4.235		P4
1	1	1		4,268	4,453							Nurse Educator, .68		P4
2	2	2		8,867	9,027							Clerk, .231		WL7
1	1	1		3,602	3,752							Secretary, .70, .71		WL6
												Clerk Typist, .0022		WL5
6	6	6	34,595	35,620	36,665							TOTAL		
												SECTION 3		
												DIVISION OF ADMINISTRATION (For text see page 14)		
												Ch. 1. <u>Office of the Chief</u>		
1	1	1		12,500	12,500							Chief of Division, .112		D2
1	1	1		5,270	5,270							Secretary, .114		WL7
				17,770	17,770							Cost of salaries		
				7,215	7,215					6,300	6,300	Duty Travel for Division		
				5,000	5,000							Audit Costs		
2	2	2	33,130	29,985	29,985				6,000	6,300	6,300	TOTAL		
												Ch. 2. <u>Administrative Management and Personnel Branch</u>		
1	1	1		5,483	5,683							Chief of Branch, 4.138		P5
1	1	1		4,760	4,760							Administrative Officer (Trainee), .0032		P2
												Secretary, .139		WL6
												<u>Management Office</u>		
1	1	1		7,506	7,731							Management Officer, .141		P3
1	1	1		3,752	3,902							Management Officer, 4.236		P2
												Clerk, .0017		WL5

WORLD HEALTH ORGANIZATION

T O T A L S

REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		12,500	12,500							1	1	1		12,500	12,500
												1	1	1		4,160	4,345
												1	1	1		3,490	3,640
				12,500	12,500											20,150	20,485
				7,130	7,130					1,000	1,000					26,080	26,080
1	1	1	19,315	19,630	19,630				1,000	1,000	1,000	3	3	3	39,980	46,230	46,565
1	1	1		11,000	11,000							1	1	1		11,000	11,000
												1	1	1		8,542	8,792
2	2	2		12,756	13,193							1	1	1		6,981	7,206
1	1	1		5,533	5,733							3	3	3		18,956	19,593
1	1	1		5,518	5,620							1	1	1		5,533	5,733
												1	1	1		5,518	5,620
2	2	2		8,845	9,215							5	5	5		21,634	22,559
												1	1	1		5,131	5,270
1	1	1		4,993	5,085							1	1	1		4,993	5,085
1	1	1		3,867	4,027							1	1	1		3,867	4,027
						1	1	1		3,540	3,690	1	1	1		3,880	4,040
												1	2	2		6,637	7,827
												1	1	1		3,540	3,690
9	9	9	50,986	52,512	53,873	1	1	1	3,390	3,540	3,690	19	20	20	100,071	106,212	110,442
1	1	1		7,525	7,750							1	1	1		9,675	9,975
												1	1	1		7,525	7,750
												1	1	1		9,208	9,458
												1	1	1		4,268	4,453
												2	2	2		8,867	9,027
												1	1	1		3,602	3,752
1	1	1	7,300	7,525	7,750							7	7	7	41,895	43,145	44,415
												1	1	1		12,500	12,500
												1	1	1		5,270	5,270
																17,770	17,770
				6,185	6,185											19,700	19,700
																5,000	5,000
			4,500	6,185	6,185							2	2	2	43,630	42,470	42,470
1	1	1		10,850	11,000							1	1	1		10,850	11,000
												1	1	1		5,483	5,683
												1	1	1		4,760	4,760
1	1	1		5,183	5,383							1	1	1		7,506	7,731
												1	1	1		5,183	5,383
												1	1	1		3,752	3,902

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
												Administrative Management and Personnel Branch (continued)	
												<u>Personnel Office</u>	
1	1	1		7,896	8,146							Personnel Officer, .148	P4
1	1	1		7,450	7,675							Procedures and Policies Officer, .0007	P3
												Classification, Wage Administration, Employee Services Officer, 4.146	P2
1	1	1		4,183	4,383							Recruitment Officer, 4.145	P2
1	1	1		4,390	4,595	1	1	1		3,883	4,083	Documentations Officer, .150	P1
1	1	1		3,893	4,053							Assistant Recruitment Officer, 9002	P1
												Personnel Assistant, .241	WL8
												Personnel Assistant, 4.144	WL7
												Clerk, .0011, 4.218, 4.142, 4.198	WL6
						1	1	1		3,590	3,740	Secretary, 4.142	WL6
												Clerk, 9015	WL5
9	9	9	47,529	49,313	50,928	2	2	2	7,123	7,473	7,823	TOTAL	
												<u>Ch. 3. Budget and Finance Branch</u>	
1	1	1		10,450	10,750							Chief of Branch, .152	P5
1	1	1		3,800	3,960							Secretary, .157	WL6
												<u>Budget Section</u>	
2	2	2		12,731	13,156							Budget Officer, .155, .0015, 4.153	P3
1	1	1		5,022	5,227	1	1	1		5,159	5,364	Administrative Officer, 4.35	P1
1	1	1		4,680	4,760							Budget Assistant, .298, 9001	WL8
1	1	1		3,490	3,640							Clerk Stenographer, .9, 4.117	WL6
												Clerk, 4.196	WL5
												Clerk Typist, .158	WL5
												<u>Finance Section</u>	
1	1	1		6,350	6,569							Finance Officer, 4.160	P4
3	3	3		16,683	17,283							Accountant, .177	P3
1	1	1		5,633	5,833							Accountant, .170, .179, .0016	P2
												Disbursement Officer, .250	P2
1	1	1		4,954	5,159							Accountant, 4.164	P1
1	1	1		4,206	4,391							Accounting Assistant, .233, 4.172	WL8
2	2	2		7,627	7,947							Accounting Assistant, .163, 4.166, 4.180, 4.182	WL7
1	1	1		3,540	3,690							Clerk, .162, .168, 4.169, 4.174, 4.176	WL6
												Clerk Typist, .67	WL5
17	17	17	85,917	89,166	92,365	1	1	1	4,954	5,159	5,364	TOTAL	
												<u>Ch. 4. General Services Office</u>	
1	1	1		8,958	9,208							Administrative Services Officer, .184	P4
												<u>Travel</u>	
1	1	1		5,116	5,270							Travel Officer, 4.187	P1
												Clerk, .188	WL7
												Clerk Stenographer, 4.189	WL6
												<u>Records and Communications</u>	
1	1	1		4,983	5,000							Administrative Services Officer, .191	P1
2	2	2		8,720	8,880							Clerk, .192, .193, 4.194	WL6
1	1	1		3,787	3,947							Clerk (Records), .0023	WL6
1	1	1		4,240	4,240							Clerk, .195	WL5
1	1	1		3,395	3,525							Clerk, .200	WL4
												<u>Printing</u>	
1	1	1		4,160	4,345							Administrative Services Officer, 4.201	P1
1	1	1		4,760	4,760							Printing Technician, .202	WL7
												Clerk, .203	WL6
												Clerk Operator, 4.291	WL6
1	1	1		3,490	3,640							Machine Operator, 4.204	WL6
												Machine Operator, .207	WL5

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		7,896	8,146
												1	1	1		7,450	7,675
1	1	1		5,400	5,600							1	1	1		5,400	5,600
						1	1	1		5,000	5,200	1	1	1		5,000	5,200
												1	1	1		4,183	4,383
												1	1	1		3,883	4,083
												1	1	1		4,390	4,595
						1	1	1		4,438	4,623	1	1	1		4,438	4,623
1	1	1		4,640	4,760	1	1	1		4,040	4,200	3	3	3		12,573	13,013
1	1	1		4,280	4,440							1	1	1		4,280	4,440
												1	1	1		3,590	3,740
5	5	5	29,333	30,353	31,183	3	3	3	12,933	13,478	14,023	19	19	19	96,918	100,617	103,957
												1	1	1		10,450	10,750
												1	1	1		3,800	3,960
1	1	1		6,925	7,150							3	3	3		19,656	20,306
1	1	1		4,900	5,000							1	1	1		4,900	5,000
												2	2	2		10,181	10,591
1	1	1		3,800	3,960							2	2	2		8,480	8,720
						1	1	1		4,390	4,390	1	1	1		4,390	4,390
												1	1	1		3,490	3,640
1	1	1		7,854	8,104							1	1	1		7,854	8,104
												1	1	1		6,350	6,569
												3	3	3		16,683	17,283
												1	1	1		5,633	5,833
1	1	1		5,000	5,000							1	1	1		5,000	5,000
1	1	1		4,646	4,851							2	2	2		9,600	10,010
2	2	2		9,553	9,877	1	1	1		4,160	4,345	4	4	4		17,919	18,613
1	1	1		4,600	4,600	2	2	2		8,293	8,613	5	5	5		20,520	21,160
												1	1	1		3,540	3,690
9	9	9	45,883	47,278	48,542	4	4	4	16,338	16,843	17,348	31	31	31	153,092	158,446	163,619
												1	1	1		8,958	9,208
1	1	1		5,000	5,000							1	1	1		5,000	5,000
1	1	1		4,053	4,213							1	1	1		5,116	5,270
												1	1	1		4,053	4,213
1	1	1		4,760	4,760							1	1	1		4,983	5,000
												3	3	3		13,480	13,640
												1	1	1		3,787	3,947
												1	1	1		4,240	4,240
												1	1	1		3,395	3,525
1	1	1		5,000	5,000							1	1	1		5,000	5,000
												1	1	1		4,160	4,345
												1	1	1		4,760	4,760
1	1	1		4,373	4,533							1	1	1		4,373	4,533
						1	1	1		4,427	4,587	1	1	1		4,427	4,587
												1	1	1		3,490	3,640

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	General Services Office (continued)	
												Property Services	
1	1	1		5,620	5,620							Administrative Services Officer, 4.215	P2
2	2	2		8,680	8,840							Administrative Services Officer, .217	WL8
1	1	1		4,760	4,760							Clerk, .216, .219	WL6
1	1	1		4,240	4,240							Switchboard Operator, .220	WL6
1	1	1		2,946	3,051							Switchboard Operator, .221	WL5
1	1	1				1	1	1		3,200	3,330	Clerk, .244, 4.224	WL4
				2,929	3,034							Clerk Messenger, 9004	WL4
												Chauffeur Laborer, .227	WL3
18	18	18	78,955	80,784	82,360	1	1	1	3,070	3,200	3,330	TOTAL	
												Ch. 5. Supply Office	
1	1	1		7,525	7,750							Supply Services Officer, .119	P4
1	1	1		5,033	5,233							Buyer, 4.9146 *	P3
1	1	1		3,800	4,000							Buyer, .121	P2
1	1	1		5,000	5,000							Supply Services Officer, .123, 4.124	P1
2	2	2		9,153	9,430							Translator, .136	P1
												Clerk, .125, .129	WL7
1	1	1		4,360	4,520							Clerk Stenographer, 4.128	WL6
												Clerk, .253	WL6
												Clerk, 4.131	WL5
												Clerk Typist, 4.130	WL5
7	7	7	33,716	34,871	35,933							TOTAL	
												SECTION 4	
												DIVISION OF PUBLIC HEALTH (For text see page 14)	
												Ch. 1. Office of the Chief	
1	1	1		12,500	12,500							Chief of Division, .72	D2
1	1	1		4,777	4,962							Secretary, .73	WL7
1	1	1		3,540	3,690							Clerk Stenographer, .286	WL5
				20,817	21,152							Cost of salaries	
				19,520	19,520					4,450	4,450	Duty Travel for Division	
3	3	3	31,482	40,337	40,672				3,200	4,450	4,450	TOTAL	
												Ch. 2. Health Promotion Branch	
1	1	1		10,400	10,700							Chief of Branch, .75	P5
												Medical Officer, 4.79	P4
												Health Educator, 4.0503	P4
1	1	1		4,440	4,600							Nurse, 4.77	P4
1	1	1		3,940	4,090							Secretary, .82	WL6
												Clerk Stenographer, .0024, 4.83, 4.92	WL5
												Clerk, 4.0504	WL5
3	3	3	18,170	18,780	19,390							TOTAL	
												Ch. 3. Communicable Diseases Branch	
1	1	1		10,875	11,000							Chief of Branch, .86	P5
	1	1		6,300	8,400							Consultant in Yellow Fever, .0033	Ung
1	1	1		9,500	9,500							Public Health Veterinarian, .88	P4
	1	1		5,475	7,469							Medical Officer, .0025, 4.239, 4.89	P4
1	1	1		4,000	4,160							Secretary, .91	WL6
3	4	4		13,237	14,634							Clerk Stenographer, .74, .93, .95, .0026, 4.84	WL5

* This post funded from the Malaria Eradication Special Account.

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		5,000	5,200							1	1	1		5,000	5,200
												1	1	1		5,620	5,620
												2	2	2		8,680	8,840
												1	1	1		4,760	4,760
1	1	1		3,785	3,850							1	1	1		4,240	4,240
												2	2	2		6,731	6,901
												1	1	1		3,200	3,330
												1	1	1		2,929	3,034
7	7	7	31,174	31,971	32,556	1	1	1	4,267	4,427	4,587	27	27	27	117,466	120,382	122,833
1	1	1		6,200	6,400							1	1	1		7,525	7,750
												1	1	1		6,200	6,400
1	1	1		5,000	5,000							1	1	1		5,033	5,233
												2	2	2		8,800	9,000
												1	1	1		5,000	5,000
1	1	1		4,360	4,520							2	2	2		9,153	9,430
												1	1	1		4,360	4,520
						1	1	1		4,040	4,190	1	1	1		4,360	4,520
1	1	1		3,502	3,652							1	1	1		4,040	4,190
												1	1	1		3,502	3,652
4	4	4	18,552	19,062	19,572	1	1	1	3,890	4,040	4,190	12	12	12	56,158	57,973	59,695
												1	1	1		12,500	12,500
												1	1	1		4,777	4,962
												1	1	1		3,540	3,690
																20,817	21,152
				23,970	23,970					3,060	3,060					51,000	51,000
			19,255	23,970	23,970				2,000	3,060	3,060	3	3	3	55,937	71,817	72,152
1	1	1		7,525	7,750							1	1	1		10,400	10,700
1	1	1		7,469	7,694							1	1	1		7,525	7,750
1	1	1		7,525	7,750							1	1	1		7,469	7,694
												1	1	1		7,525	7,750
2	2	2		7,067	7,367							1	1	1		4,440	4,600
	1	1		3,340	3,490							3	3	3		11,007	11,457
													1	1		3,340	3,490
5	6	6	26,842	32,926	34,051							8	9	9	45,012	51,706	53,441
												1	1	1		10,875	11,000
													1	1		6,300	8,400
2	2	2		15,050	15,500								1	1		9,500	9,500
												2	3	3		20,525	22,969
1	1	1		3,565	3,715							1	1	1		4,000	4,160
												4	5	5		16,802	18,349

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
1	1	1		9,396	9,675	1	1	1		7,525	7,750	Communicable Diseases Branch (continued)	P5
	1	1		5,475	7,469							Epidemiological and Statistical Section	P4
2	2	2		12,794	13,219							Statistician, .96	P3
2	2	2		11,583	11,783							Statistician, .0027, 9007	P2
2	2	2		10,000	10,000							Statistician, .0029, .97	P1
												Statistician, .98, .102, 4.99	WL8
1	1	1		4,544	4,749							Statistician, .100, .101	WL8
												Statistical Assistant, 4.103	WL6
1	1	1		4,600	4,760	1	1	1		3,840	4,000	Technical Assistant, .0028	WL6
1	2	2		6,745	7,692							Clerk Stenographer, 9008, 4.106	WL5
												Clerk, .104	
												Clerk Typist, .105, .0030	
16	21	21	87,618	114,524	124,510	2	2	2	10,980	11,365	11,750	TOTAL	
												Ch. 4. Environmental Sanitation Branch	
1	1	1		9,167	9,417							Chief of Branch, 4.107	P5
												Sanitary Engineer, .245	P4
1	1	1		3,477	3,627							Secretary, 4.111	WL6
												Clerk Stenographer, .246	WL5
2	2	2	12,257	12,644	13,044							TOTAL	
												Ch. 5. Malaria Eradication	
1	1	1		11,700	12,000							Chief Malaria Eradication, .1023	D1
1	1	1		9,458	9,750							Deputy Chief, .1074	P5
1	1	1		9,396	9,675	1	1	1		9,000	9,250	Scientist (Epidemiologist), .1073	P5
						1	1	1		7,525	7,750	Malariologist, 9127	P5
						1	1	1		4,954	5,159	Operations Officer, 9128	P4
						1	1	1		4,160	4,345	Technical Assistant, 9011	WL8
						1	1	1		4,760	4,760	Secretary, 9012	WL7
						1	1	1		4,390	4,390	Secretary, 9013	WL6
						1	1	1		3,652	3,802	Clerk Stenographer, 9014	WL5
												Clerk, 9016	WL5
				30,554	31,425					38,441	39,456	Cost of salaries	
				11,060	11,060					12,315	12,315	Duty Travel	
3	3	3	41,054	41,614	42,485	7	7	7	52,313	50,756	51,771	TOTAL	
												SECTION 5	
												TEMPORARY PERSONNEL (For text see page 14)	
			8,200	9,546	8,962				2,500	2,500	2,500	Temporary Personnel	
												SECTION 6	
												COMMON STAFF COSTS (For text see page 14)	
			107,818	114,209	118,042				5,567	5,745	5,911	Ch. 1. Pension	
			16,856	18,004	18,659				1,951	2,015	2,075	Ch. 2. Insurance	
			86,983	90,133	91,045				8,475	8,475	8,475	Ch. 3. Post Adjustment Allowance	
									3,242	3,357	3,468	Ch. 4. Service Benefit	
												Ch. 5. Repatriation Grant	
			32,900	34,300	34,100				2,300	2,300	2,300	Ch. 6. Dependents' Allowance	
			22,800	7,600					7,600			Ch. 7. Recruitment Costs	
			9,260	29,270	9,370					5,000	2,200	Ch. 8. Home Leave Travel	
			95,408	96,808	100,008				3,815	3,965	4,115	Ch. 9. Reimbursement of Income Tax	
			372,025	390,324	371,224				32,950	30,857	28,544	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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		9,396	9,675
												1	2	2		13,000	15,219
												2	2	2		12,794	13,219
1	1	1		6,383	6,400							3	3	3		17,966	18,183
												2	2	2		10,000	10,000
1	1	1		4,920	5,125							1	1	1		4,920	5,125
												1	1	1		4,544	4,749
1	1	1		4,600	4,600							2	2	2		8,440	8,600
												1	1	1		4,600	4,760
												1	2	2		6,745	7,692
6	6	6	33,513	34,518	35,340							24	29	29	132,111	160,407	171,600
1	1	1		9,333	9,600							1	1	1		9,333	9,600
												1	1	1		9,167	9,417
1	1	1		4,173	4,333							1	1	1		4,173	4,333
												1	1	1		3,477	3,627
2	2	2	13,096	13,506	13,933							4	4	4	25,353	26,150	26,977
												1	1	1		11,700	12,000
												1	1	1		9,458	9,750
												1	1	1		9,396	9,675
												1	1	1		9,000	9,250
												1	1	1		7,525	7,750
												1	1	1		4,954	5,159
												1	1	1		4,160	4,345
												1	1	1		4,760	4,760
												1	1	1		4,390	4,390
												1	1	1		3,652	3,802
																68,995	70,881
																23,375	23,375
												10	10	10	93,367	92,370	94,256
				3,146	3,730										10,700	15,192	15,192
			39,575	41,081	42,060				5,050	5,230	5,411				158,010	166,265	171,424
			6,958	7,269	7,447				919	954	987				26,684	28,242	29,168
			42,084	42,540	42,540				950	950	950				138,492	142,098	143,010
			2,767	3,005	3,108				756	789	821				6,765	7,151	7,397
				450	450											450	450
			13,410	13,500	13,500				180	180	180				48,790	50,280	50,080
			17,500						1,200						49,100	7,600	
			800	900	11,600						500				10,060	35,170	23,670
			43,138	43,876	44,610				3,461	3,561	3,661				145,822	148,210	152,394
			166,232	152,621	165,315				12,516	11,664	12,510				583,723	585,466	577,593

PAN AMERICAN HEALTH ORGANIZATION											PART II HEADQUARTERS	
REGULAR BUDGET						OTHER FUNDS						
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	SECTION 7 COMMON SERVICES - HEADQUARTERS (For text see page 15) Ch. 1. <u>Space and Equipment Services</u> Contracted Custodial Services Rent Fuel Electricity Gas Water Elevator Maintenance Trash Removal - Extermination Janitorial Supplies Buildings, Repairs and Upkeep Special - Interior Painting Equipment, Repair and Maintenance
			\$	\$	\$				\$	\$	\$	
			18,644	18,644	18,644				2,424	2,424	2,424	
			5,900	12,980	12,980				767	1,687	1,687	
			2,065	2,065	2,065				268	268	268	
			4,956	4,956	4,956				644	644	644	
			413	413	413				54	54	54	
			295	295	295				38	38	38	
			531	531	531				69	69	69	
			413	413	413				54	54	54	
			1,770	1,770	1,770				230	230	230	
			2,360	2,950	2,950				307	384	384	
			8,850						1,150			
			2,242	2,242	2,242				291	291	291	
			48,439	47,259	47,259				6,296	6,143	6,143	TOTAL
												Ch. 2. <u>Other Services</u> <u>Communications</u> Postage Cables Telephone Toll Charges Telephone Service Charges <u>Other Contractual Services</u> Medical Examinations Miscellaneous <u>Local Transportation</u> Vehicle Operation Miscellaneous Transportation
			8,968	8,968	8,968				1,166	1,166	1,166	
			8,850	8,850	8,850				1,150	1,150	1,150	
			3,776	3,776	3,776				491	491	491	
			8,260	8,260	8,260				1,074	1,074	1,074	
			2,360	2,360	2,360				307	307	307	
			2,950	2,950	2,950				383	383	383	
			649	649	649				84	84	84	
			2,360	2,360	2,360				307	307	307	
			38,173	38,173	38,173				4,962	4,962	4,962	TOTAL
												Ch. 3. <u>Supplies and Materials</u> Office Supplies Printing Supplies Contract Printing
			7,670	7,670	7,670				997	997	997	
			7,080						920			
			4,720	22,857	22,857				614	2,972	2,972	
			19,470	30,527	30,527				2,531	3,969	3,969	TOTAL
												Ch. 4. <u>Fixed Charges and Claims</u> Insurance - Non-Staff
			3,245	3,245	3,245				422	422	422	
												Ch. 5. <u>Acquisition of Capital Assets</u> * Equipment
			2,500	9,500	9,500							
												SUMMARY
			48,439	47,259	47,259				6,296	6,143	6,143	Ch. 1. Space and Equipment Services
			38,173	38,173	38,173				4,962	4,962	4,962	Ch. 2. Other Services
			19,470	30,527	30,527				2,531	3,969	3,969	Ch. 3. Supplies and Materials
			3,245	3,245	3,245				422	422	422	Ch. 4. Fixed Charges and Claims
			2,500	9,500	9,500							Ch. 5. Acquisition of Capital Assets
			111,827	128,704	128,704				14,211	15,496	15,496	TOTAL

* Direct Charges

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			8,952	8,952	8,952				1,580	1,580	1,580				31,600	31,600	31,600
			2,833	6,233	6,233				500	1,100	1,100				10,000	22,000	22,000
			992	992	992				175	175	175				3,500	3,500	3,500
			2,380	2,380	2,380				420	420	420				8,400	8,400	8,400
			198	198	198				35	35	35				700	700	700
			142	142	142				25	25	25				500	500	500
			255	255	255				45	45	45				900	900	900
			198	198	198				35	35	35				700	700	700
			850	850	850				150	150	150				3,000	3,000	3,000
			1,133	1,416	1,416				200	250	250				4,000	5,000	5,000
			4,250						750						15,000		
			1,077	1,077	1,077				190	190	190				3,800	3,800	3,800
			23,260	22,693	22,693				4,105	4,005	4,005				82,100	80,100	80,100
			4,306	4,306	4,306				760	760	760				15,200	15,200	15,200
			4,250	4,250	4,250				750	750	750				15,000	15,000	15,000
			1,813	1,813	1,813				320	320	320				6,400	6,400	6,400
			3,966	3,966	3,966				700	700	700				14,000	14,000	14,000
			1,133	1,133	1,133				200	200	200				4,000	4,000	4,000
			1,417	1,417	1,417				250	250	250				5,000	5,000	5,000
			312	312	312				55	55	55				1,100	1,100	1,100
			1,133	1,133	1,133				200	200	200				4,000	4,000	4,000
			18,330	18,330	18,330				3,235	3,235	3,235				64,700	64,700	64,700
			3,683	3,683	3,683				650	650	650				13,000	13,000	13,000
			3,400						600						12,000		
			2,266	10,983	10,983				400	1,938	1,938				8,000	38,750	38,750
			9,349	14,666	14,666				1,650	2,588	2,588				33,000	51,750	51,750
			1,558	1,558	1,558				275	275	275				5,500	5,500	5,500
			2,500	9,500	9,500										5,000	19,000	19,000
			23,260	22,693	22,693				4,105	4,005	4,005				82,100	80,100	80,100
			18,330	18,330	18,330				3,235	3,235	3,235				64,700	64,700	64,700
			9,349	14,666	14,666				1,650	2,588	2,588				33,000	51,750	51,750
			1,558	1,558	1,558				275	275	275				5,500	5,500	5,500
			2,500	9,500	9,500										5,000	19,000	19,000
			54,997	66,747	66,747				9,265	10,103	10,103				190,300	221,050	221,050

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	ZONE OFFICE - CARACAS (For text see page 16)		
1	1	1		11,200	11,333							Zone Representative, .275		D1
1	1	1		9,125	9,375							Assistant Zone Representative, .8002		P5
1	1	1		7,525	7,750							Public Health Engineer, .8006		P4
1	1	1		7,394	7,619							Nurse, .8003		P4
1	1	1		7,680	7,920							Administrative Officer, .8004		P4
1	1	1		5,082	5,284							Accounts and Budget Officer, .8008		P2
1	1	1		6,700	6,900							Secretary, .8009		*
2	2	2		14,400	14,400							Secretary, .279, .296		*
1	1	1		7,200	7,200							Accounting Clerk, .8011		*
1	1	1		7,200	7,200	1	1	1		6,700	6,900	Clerk Stenographer, .8019		*
												Accounting Assistant, 9017		*
1	1	1		6,000	6,250							Personnel Clerk, .8005		*
1	1	1		4,625	4,825							General Services Clerk, .8010		*
												Records and Communications Clerk, .287		*
1	1	1		4,600	4,800							Chauffeur-Messenger, .8012		*
1	1	1		3,600	3,825							Janitor, .8013		*
1	1	1		2,700	2,950							Estimated Local Wage Increases		
				1,200	1,200									
				106,231	108,831					6,700	6,900	Cost of Salaries		
												Allowances		
				15,031	15,415					938	966	Pension Fund		
				3,087	3,146					151	155	Insurance		
				31,200	31,200							Post Adjustments		
				7,000	7,000							Assignment		
				3,100	3,200							Dependents'		
												Travel and Transportation		
				10,500	10,500							Duty		
				2,750	4,900							Home Leave		
				300	300									
												Hospitality		
												Common Services		
				2,016	2,016							Space and Equipment Services		
				12,510	12,510							Other Services		
				3,600	3,600							Supplies and Materials		
				335	335							Fixed Charges and Claims		
				1,000	3,000							Acquisition of Capital Assets		
15	16	16	181,065	198,660	205,953	1	1	1	6,244	7,789	8,021	SUB-TOTAL		
			(53,000)	(53,000)	(53,000)				53,000	53,000	53,000	Costs Payable by Government of Venezuela		
15	16	16	128,065	145,660	152,953	1	1	1	59,244	60,789	61,021	TOTAL		
												BRITISH GUIANA AND WEST INDIES		
												BRITISH GUIANA-5, Malaria Eradication (For text see page 17)		
										2,800	2,800	Short-term Consultants		
										2,400	2,400	Fees		
												Travel		
										11,000	11,000	Supplies and Equipment		
									19,200	16,200	16,200			
												Estimated Government Contribution		
												BRITISH GUIANA-7, Filariasis (For text see page 17)		
			1,210									All Purposes		
												Estimated Government Contribution		

*Salaries based on a preliminary estimate pending establishment of local classifications.

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		11,200	11,333
												1	1	1		9,125	9,375
												1	1	1		7,525	7,750
												1	1	1		7,394	7,619
												1	1	1		7,680	7,920
												1	1	1		5,082	5,284
												1	1	1		6,700	6,900
												2	2	2		14,400	14,400
												1	1	1		7,200	7,200
													1	1		7,200	7,200
												1	1	1		6,700	6,900
												1	1	1		6,000	6,250
												1	1	1		4,625	4,825
												1	1	1		4,600	4,800
												1	1	1		3,600	3,825
												1	1	1		2,700	2,950
																1,200	1,200
																112,931	115,731
																15,969	16,381
																3,238	3,301
																31,200	31,200
																7,000	7,000
																3,100	3,200
																10,500	10,500
																2,750	4,900
																300	300
																2,240	2,240
																13,900	13,900
																4,000	4,000
																335	335
																1,000	3,000
			980	2,014	2,014							16	17	17	188,289	208,463	215,988
			980	2,014	2,014							16	17	17	188,289	208,463	215,988
															19,200	16,200	16,200
															(25,000)	(25,000)	25,000
															1,210		
															(50,000)		

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				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	BRITISH GUIANA-10, Public Health Services (For text see page 17)	
												Medical Officer, 4.8508	P4
												Allowances and Statutory Travel	
												Duty Travel	
												Estimated Government Contribution	
												BRITISH GUIANA AND WEST INDIES-1, Aedes aegypti Eradication (For text see page 17)	
												Entomologist, 4.284	P3
												Sanitarian, 4.907, 4.908, 4.994, 4.8503, 4.8505	P2
												Sanitarian, 4.909, 4.910	P1
												Cost of Salaries	
												Allowances and Statutory Travel	
												Duty Travel	
					3,500							Supplies and Equipment	
					3,500								
												Estimated Government Contribution	
												BRITISH GUIANA AND WEST INDIES-3, Public Health Nursing (For text see page 17)	
												Public Health Nurse, 4.8501	P3
												Allowances and Statutory Travel	
												Duty Travel	
			4,130										
												Estimated Government Contribution	
												BRITISH GUIANA AND WEST INDIES-4, PAHO Public Health Administration Fellowships (For text see page 18)	
			4,300	4,300	4,300							Fellowships	
												JAMAICA-2, Malaria Eradication (For text see page 18)	
						1	1	1	8,312	8,562		Medical Officer, 9129	P4
						1	1	1	8,250	8,500		Sanitary Engineer, 9103	P4
						2	2	2	9,967	10,367		Sanitarian, 9065, 9066	P2
									26,529	27,429		Cost of Salaries	
									16,416	22,833		Allowances and Statutory Travel	
									4,270	4,270		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			ZONE I		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	JAMAICA-2, (continued)		
										8,102	8,102	Supplies and Equipment		
										2,335		Fellowships		
						4	4	4	58,467	57,652	62,634			
												Estimated Government Contribution		
												<u>JAMAICA-4, University College of the West Indies</u> (For text see page 18)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Estimated Government Contribution		
												<u>JAMAICA-11, Public Health Training Station</u> (For text see page 18)		
												Short-term Consultants Fees Travel		
												Estimated Government Contribution		
												<u>JAMAICA-12, Nursing Education</u> (For text see page 18)		
1	1			6,100	6,300							Nurse Educator, .8020		
				2,100	3,381							Allowances and Statutory Travel		
				4,300								Fellowships		
1	1			12,500	9,681									
												Estimated Government Contribution		
												<u>TRINIDAD-3, Malaria Eradication</u> (For text see page 18)		
										31,430	32,600	Supplies and Equipment		
										1,800		Fellowships		
									32,790	33,230	32,600			
												Estimated Government Contribution		
												<u>TRINIDAD-6, Public Health Legislation</u> (For text see page 19)		
												All Purposes		
												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 I	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	WINDWARD ISLANDS-2, Malaria Eradication (For text see page 19)	
						2	2	2		10,299	10,700	Sanitarian, 9067, 9132	
										6,366	6,605	Allowances and Statutory Travel	
										2,326	2,326	Duty Travel	
										1,500	1,500	Supplies and Equipment	
						2	2	2	25,710	20,491	21,131		
												Estimated Government Contribution	
	1	1	9,640	16,800	17,481	6	6	6	136,167	127,573	132,565	TOTAL - BRITISH GUIANA AND WEST INDIES	
												<u>FRENCH ANTILLES AND GUIANA</u>	
												<u>FRENCH ANTILLES AND GUIANA-2, Aedes aegypti Eradication</u> (For text see page 19)	
												Sanitarian, 4.283	
												Allowances and Statutory Travel	
												Duty Travel	
												Estimated Government Contribution	
												<u>FRENCH ANTILLES AND GUIANA-3, PAHO Public Health Administration Fellowships</u> (For text see page 19)	
			4,300	4,300	4,300							Fellowships	
			4,300	4,300	4,300							TOTAL - FRENCH ANTILLES AND GUIANA	
												<u>SURINAM AND NETHERLANDS ANTILLES</u>	
						1	1	1		7,563	7,791	<u>SURINAM-1, Malaria Eradication</u> (For text see page 19)	
						2	2	2		10,100	10,500	Medical Officer, 9133 Sanitarian, 9147, 9203	
										17,663	18,291	Cost of Salaries	
										8,143	8,344	Allowances and Statutory Travel	
										4,025	4,025	Duty Travel	
										1,040	1,040	Supplies and Equipment	
						3	3	3	34,784	30,871	31,700		
												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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												2	2	2	25,710	20,491	21,131
															(64,500)	(58,000)	(31,500)
1	1	1	9,259	14,255	25,705	9	8	8	59,971	62,725	59,192	16	16	16	215,037	221,353	234,943
						1	1	1		6,250	6,400						
										1,886	676						
										494	494						
						1	1	1	10,007	8,630	7,570	1	1	1	10,007	8,630	7,570
															(16,000)	(16,000)	(16,000)
															4,300	4,300	4,300
						1	1	1	10,007	8,630	7,570	1	1	1	14,307	12,930	11,870
												3	3	3	34,784	30,871	31,700
															(140,000)	(140,000)	(140,000)

122

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
	1	1	\$	\$	\$				\$	\$	\$	SURINAM AND NETHERLANDS ANTILLES-1, <u>Aedes aegypti Eradication</u> (For text see page 19) Sanitarian, 8021 Sanitarian, 4.1158 Allowances and Statutory Travel Duty Travel		P2 P1
				3,600	4,950									
				4,077	2,392									
				850	850									
	1	1		8,527	8,192									
												Estimated Government Contribution		
												SURINAM AND NETHERLANDS ANTILLES-2, <u>PAHO Public Health Administration</u> <u>Fellowships</u> (For text see page 20) Fellowships		
			4,300	4,300	4,300									
	1	1	4,300	12,827	12,492	3	3	3	34,784	30,871	31,700	TOTAL - SURINAM AND NETHERLANDS ANTILLES		
												VENEZUELA		
												VENEZUELA-1, Local Health Services (For text see page 20) All Purposes		
												Estimated Government Contribution		
												VENEZUELA-2, Mental Health (For text see page 20) All Purposes		
												VENEZUELA-5, Onchocerciasis <u>Investigation</u> (For text see page 20) All Purposes		
												VENEZUELA-9, PAHO Public Health <u>Administration Fellowships</u> (For text see page 20) Fellowships		
			4,300	4,300	4,300									
												VENEZUELA-11, Plague Investigation (For text see page 20) All Purposes		
			7,487											
		1			5,475							VENEZUELA-13, Treponematoses <u>Eradication</u> (For text see page 20) Medical Officer, .8015 Short-term Consultants Fees Travel		P4
				1,400										
				1,200										

[illegible]

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	VENEZUELA-13, (continued)		
					8,747							Allowances and Statutory Travel		
					1,500							Duty Travel		
		1		2,600	15,722							Estimated Government Contribution		
												VENEZUELA-14, Nursing Education (For text see page 20)		
												Nurse Educator, 4.8507		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
			4,300									Estimated Government Contribution		
												VENEZUELA-15, Health Aspects of Nuclear Energy (For text see page 20)		
				4,300	4,300							Fellowships		
												VENEZUELA-16, Aedes aegypti Eradication (For text see page 20)		
1	1	1		7,412	7,637							Medical Officer, .4004		
3	3	3		16,300	16,900							Sanitarian, .4005, .4006, .4007		
				23,712	24,537							Cost of Salaries		
				33,849	33,380							Allowances and Statutory Travel		
				15,000	15,000							Duty Travel		
4	4	4	54,602	72,561	72,917							Estimated Government Contribution		
												VENEZUELA-17, Medical Education (For text see page 20)		
				4,200	2,800							Short-term Consultants		
				3,600	2,400							Fees		
				4,300	8,600							Travel		
												Fellowships		
				12,100	13,800							Estimated Government Contribution		
												VENEZUELA-18, National Institute of Hygiene (For text see page 21)		
					4,200							Short-term Consultants		
					3,600							Fees		
					7,800							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			ZONE I		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	VENEZUELA-19, School of Public Health (For text see page 21)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Fellowships		
												VENEZUELA-20, Public Health Aspects of Accident Prevention (For text see page 21)		
			1,480									All Purposes		
4	4	5	72,169	95,861	118,839							TOTAL - VENEZUELA		
												INTER-COUNTRY PROGRAMS		
												AMRO-8, Aedes aegypti Eradication (Caribbean) (For text see page 21)		P4
												Medical Officer, 4.905		
												Allowances and Statutory Travel		
												Duty Travel		
												AMRO-47, Yaws Eradication and Public Health Laboratory Services (Caribbean) (For text see page 21)		
												Medical Officer, .8018, 4.1083 Laboratory Adviser, 4.1015		P4 P4
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
1			10,444											
												Estimated Government Contribution		
												AMRO-95, Environmental Sanitation (Caribbean) (For text see page 22)		
1	1	1		4,950	5,150							Sanitary Engineer, 4.1106 Sanitarian, .8014, 4.1170		P4 P2
				2,392	3,523							Cost of Salaries		
				1,000	1,000							Allowances and Statutory Travel		
												Duty Travel		
1	1	1	7,536	8,342	9,673									
												Estimated Government Contribution		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				1,800	1,800												
				2,100	2,100												
				1,000													
				4,300	4,300												
			2,690	9,200	8,200										2,690	9,200	8,200
															1,480		
			6,970	9,200	8,200	2	1	1	13,145	16,028	17,037	6	5	6	92,284	121,089	144,076
						1	1	1		9,417	9,500						
										9,096	11,113						
										4,000	4,000						
						1	1	1	24,081	22,513	24,613	1	1	1	24,081	22,513	24,613
						1	1	1		7,469	7,694						
										7,469	7,694						
										2,641	3,424						
										2,900	2,900						
						1	1	1	12,711	13,010	14,018	2	1	1	23,155	13,010	14,018
															(100,000)	(125,000)	(115,000)
						1	1	1		7,469	7,694						
						1	1	1		6,150	6,350						
										13,619	14,044						
										6,063	8,127						
										3,730	3,730						
						2	2	2	25,130	23,412	25,901	3	3	3	32,666	31,754	35,574
															(780,000)	(780,000)	(780,000)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-117, Malaria Technical Advisory Services (Zone I)</u> (For text see page 22)		
						1	1	1		9,208	9,458	Chief Zone Malaria Adviser, 9086		
						1	1	1		7,469	7,693	Epidemiologist, 9200		
						1	1	1		7,714	7,959	Sanitary Engineer, 9134		
						1	1	1		7,469	7,693	Administrative Methods Officer, 9150		
						1	1	1		7,637	7,875	Laboratory Adviser, 9087		
						1	1	1		6,316	6,532	Entomologist, 9088		
						1	1	1		4,900	5,100	Sanitarian, 9237		
						1	1	1		2,973	3,120	Secretary, 9107		
										53,686	55,430	Cost of Salaries		
										31,409	40,555	Allowances and Statutory Travel		
										16,963	16,963	Duty Travel		
										2,540	1,550	Supplies and Equipment		
										4,700	4,700	Common Services		
						8	8	8	111,834	109,298	119,198			
												<u>AMRO-134, Training Center for Malaria Eradication (Kingston)</u> (For text see page 22)		
						1	1	1		10,075	10,375	Chief, Training Center, 9108		
						2	2	2		12,722	13,148	Sanitarian, 9116, 9185		
						1	1	1		5,283	5,483	Administrative Officer, 9114		
						3	3	3		8,572	8,908	Secretary, 9115, 9141, 9205		
						1	1	1		1,155	1,225	Chauffeur-Messenger, 9142		
										37,807	39,139	Cost of Salaries		
										2,800	2,800	Short-term Consultants		
										2,400	2,400	Fees		
												Travel		
										17,221	14,316	Allowances and Statutory Travel		
										2,536	2,536	Duty Travel		
										6,450	4,450	Supplies and Equipment		
										7,190	7,190	Common Services		
						8	8	8	77,435	76,404	72,831			
												Estimated Government Contribution		
1	1	1		7,412	7,637							<u>AMRO-157, Health Statistics (Zone I)</u> (For text see page 22)		
				3,512	4,546							Statistician, .8000		
				2,250	2,250							Allowances and Statutory Travel		
												Duty Travel		
1	1	1	9,833	13,174	14,433									
												Estimated Government Contribution		
												<u>AMRO-204, Environmental Sanitation Training (Zone I)</u> (For text see page 22)		
												Fellowships		
3	2	2	27,813	21,516	24,106	16	16	16	189,269	185,702	192,029	TOTAL - INTER-COUNTRY PROGRAMS		
7	8	9	118,222	151,304	177,218	25	25	25	360,220	344,146	356,294	TOTAL - ZONE I PROGRAMS		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - MEXICO, D.F.</u> (For text see page 16)		
1	1	1		12,000	12,000							Zone Representative, .300 Assistant Zone Representative, 4.303 Medical Officer, 4.302 Nurse, .304 Administrative Officer, .305 Accounts and Budget Officer, .2009 Accountant, .330 Administrative Services Assistant, .310 Accountant Assistant, .341 Clerk, 9124 Clerk Stenographer, .308, .309, .331, .332, .349 Clerk, .2010, 9123 Chauffeur, .311 Clerk, .368 Janitor, .340 Estimated Local Wage Increases		
												D1 P5 P4 P4 P4 P2 ML7		
1	1	1		7,525	7,750									
1	1	1		7,896	8,146									
1	1	1		5,483	5,683									
1	1	1		3,022	3,135									
1	1	1		3,387	3,499									
1	1	1		2,466	2,561	1	1	1		2,481	2,575	ML7 ML6 ML6		
5	5	5		10,470	10,856									
1	1	1		2,042	2,118	1	1	1		1,933	2,010	ML5 ML5 ML3 ML3 ML1		
1	1	1		1,507	1,563									
1	1	1		1,348	1,404									
1	1	1		1,125	1,165									
				1,000	1,000									
				59,271	60,880					4,414	4,585	Cost of salaries		
												<u>Allowances</u>		
				8,388	8,884					434	450	Pension Fund		
				1,311	1,347					99	103	Insurance		
				1,370	1,370							Post Adjustment		
				4,350	4,350							Assignment		
				2,700	2,550					77	80	Dependents' Repatriation Grant Service Benefit		
												<u>Travel and Transportation</u>		
				7,140	7,140							Duty		
				400	5,818							Home Leave		
				300	300							<u>Hospitality</u>		
												<u>Common Services</u>		
				3,240	3,240							Space and Equipment Services		
				7,101	7,101							Other Services		
				2,529	2,529							Supplies and Materials		
				150	150							Fixed Charges and Claims		
				500	500							Acquisition of Capital Assets		
16	16	16	113,781	98,750	106,159	2	2	2	5,020	5,024	5,218	TOTAL		
												<u>CUBA</u>		
												<u>CUBA-1, Aedes aegypti Eradication</u> (For text see page 23)		
1	1	1		9,062	9,312							Medical Officer, .336 Sanitarian, .344		
1	1	1		5,750	5,950							P4 P2		
				14,812	15,262							Cost of Salaries		
				15,698	11,497							Allowances and Statutory Travel		
				6,600	6,600							Duty Travel		
				10,000	10,000							Supplies and Equipment		
2	2	2	42,592	47,110	43,359							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 II		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>CUBA-3, Public Health Services</u> (For text see page 23) Medical Officer, 4.374 Sanitary Engineer, 4.2500 Public Health Nurse, 4.375 Cost of Salaries Allowances and Statutory Travel Duty Travel		P5 P4 P3
			9,335											
												Estimated Government Contribution		
												<u>CUBA-4, Nursing Education</u> (For text see page 23) Nurse Educator, 4.2508 Allowances and Statutory Travel Duty Travel Supplies and Equipment Fellowships		P3
												Estimated Government Contribution		
												<u>CUBA-5, Malaria Eradication</u> (For text see page 23) Medical Officer, 9126 Sanitarian, 9156 Cost of Salaries Allowances and Statutory Travel Duty Travel Common Services Fellowships		P4 P2
						1	1	1	7,506	7,731				
						1	1	1	4,950	5,150				
									12,456	12,881				
									8,368	10,632				
									1,800	1,800				
									425	425				
									1,300	1,300				
						2	2	2	29,185	24,349	27,038	Estimated Government Contribution		
												<u>CUBA-6, PAHO Public Health Administration Fellowships</u> (For text see page 23) Fellowships		
			4,300	12,900	8,600									
												<u>CUBA-9, Waterworks Training Course</u> (For text see page 24) All Purposes		
2	2	2	56,227	60,010	51,959	2	2	2	29,185	24,349	27,038	TOTAL - CUBA		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>DOMINICAN REPUBLIC</u>		
												<u>DOMINICAN REPUBLIC-2, Malaria</u>		
												<u>Eradication</u>		
												(For text see page 24)		
						1	1	1		7,638	7,875	Medical Officer, 9029		
						1	1	1		7,792	8,042	Sanitary Engineer, 9040		
						2	2	2		10,267	10,667	Sanitarian, 9036, 9038		
						1	1	1		3,700	3,900	Sanitarian, 9231		
										29,397	30,484	Cost of Salaries		
										29,540	22,759	Allowances and Statutory Travel		
										10,960	10,960	Duty Travel		
						5	5	5	59,865	69,897	64,203			
												Estimated Government Contribution		
												<u>DOMINICAN REPUBLIC-3, Nursing</u>		
												<u>Education</u>		
												(For text see page 24)		
												Nurse Educator, 4.372		
												Nurse Educator, 4.373		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>DOMINICAN REPUBLIC-4, Public Health</u>		
												<u>Services</u>		
												(For text see page 24)		
1	1	1		9,675	9,975							Medical Officer, .342		
1	1	1		8,458	8,708							Sanitary Engineer, .353		
1	1	1		7,413	7,638							Health Educator, .2000		
2	1	1		6,150	6,350							Public Health Nurse, .343		
				31,696	32,671							Cost of Salaries		
				20,998	27,571							Allowances and Statutory Travel		
				2,400	2,400							Duty Travel		
				50	50							Supplies and Equipment		
				4,300	4,300							Fellowships		
5	4	4	61,128	59,444	66,992							Estimated Government Contribution		
												<u>DOMINICAN REPUBLIC-8, Aedes aegypti</u>		
												<u>Eradication</u>		
												(For text see page 24)		
												Medical Officer, 4.316		
												Sanitarian, 4.317		
												Cost of Salaries		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												5	5	5	59,865	69,897	64,203
															(500,000)	(500,000)	(500,000)
1	1	1		6,150	6,350												
1	1	1		5,483	5,683												
				11,633	12,033												
				7,239	7,416												
				1,680	1,680												
				4,300	4,300												
2	2	2	24,870	24,852	25,429							2	2	2	24,870	24,852	25,429
															(80,000)	(80,000)	(80,000)
												5	4	4	61,128	59,444	66,992
															(355,000)	(330,000)	(330,000)
						1	1	1	7,854	8,104							
						1	1	1	3,850	4,050							
									11,704	12,154							

130

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	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	DOMINICAN REPUBLIC-8, (continued)	
												Allowances and Statutory Travel	
												Duty Travel	
			7,200									Estimated Government Contribution	
												DOMINICAN REPUBLIC-10, BCG Vaccination (For text see page 24)	
			7,800									All Purposes	
												Estimated Government Contribution	
												DOMINICAN REPUBLIC-11, PAHO Public Health Administration Fellowships (For text see page 25)	
			4,300									Fellowships	
												DOMINICAN REPUBLIC-14, Medical Education (For text see page 25)	
				4,000								Fellowships	
1	1	1		7,896	8,146							DOMINICAN REPUBLIC-52, Venereal Disease Control (For text see page 25)	
1	1	1		7,638	7,875							Medical Officer, .320	
				15,534	16,021							Serologist, .2008	
				13,116	14,422							Cost of Salaries	
				1,800	1,800							Allowances and Statutory Travel	
2	2	2	31,112	30,450	32,243							Duty Travel	
												Estimated Government Contribution	
7	6	6	111,540	93,894	99,235	5	5	5	59,865	69,897	64,203	TOTAL - DOMINICAN REPUBLIC	
1	1	1		9,396	7,812							HAITI	
	1			7,581								HAITI-1, Yaws Eradication (For text see page 25)	
	1			4,300								Medical Officer, .335	
				21,277	7,812							Medical Officer, .2022, 4.323	
				13,824	6,727							Sanitarian, .2023, 4.364, 4.365	
				5,720	1,120							Cost of Salaries	
1	3	1	16,576	40,821	15,659							Allowances and Statutory Travel	
												Duty Travel	
												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 II		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>HAITI-4, Malaria Eradication</u> (For text see page 25)		
							1	1		7,413	7,638	Chief Country Malaria Adviser, 9080 P4		
							1	1		7,413	7,638	Medical Officer, 9079 P4		
							1	1		7,413	7,638	Health Educator, 9144 P4		
							1	1		7,413	7,638	Sanitary Engineer, 9046 P4		
							1	1		6,100	6,300	Sanitarian, 9047 P3		
							1	1		6,100	6,300	Administrative Officer, 9049 P3		
							1	1		6,100	6,300	Statistician, 9081 P3		
												Sanitarian, 9048, 9232, 9233, 4.357, 4.358		
							3	3		14,700	15,300	Administrative Officer, 9145 P2		
							1	1		3,867	4,067	Accountant, 9050 P1		
							1	1		3,675	3,825	Clerk Stenographer, 9051 HL7		
							1	1		1,550	1,650			
										71,744	74,294	Cost of Salaries		
										34,615	45,992	Allowances and Statutory Travel		
										21,032	21,032	Duty Travel		
						11	13	13	215,477	127,391	141,318			
												Estimated Government Contribution		
												<u>HAITI-7, Public Health Laboratory</u> (For text see page 26)		
1	1	1		7,469	7,694							Laboratory Adviser, .339 P4		
				3,521	4,554							Allowances and Statutory Travel		
1	1	1	5,863	10,990	12,248									
												Estimated Government Contribution		
												<u>HAITI-12, PAHO Public Health Administration Fellowships</u> (For text see page 26)		
			4,300	4,300								Fellowships		
												<u>HAITI-14, Aedes aegypti Eradication</u> (For text see page 26)		
												All Purposes		
												Estimated Government Contribution		
												<u>HAITI-16, Public Health Services</u> (For text see page 26)		
	1	1		5,475	7,469							Medical Officer, 4.2507 P4		
				5,475	7,469							Sanitary Engineer, .2018 P4		
				5,121	3,419							Public Health Nurse, 4.2509 P3		
				780	780							Cost of Salaries		
				2,900								Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
	1	1		14,276	11,668									
												Estimated Government Contribution		
												<u>HAITI-19, Medical Education</u> (For text see page 26)		
1	1	1		7,525	7,750							Professor of Microbiology, .2020 P4		
				7,300	7,525							Professor of Physiology, .2021 P4		
				14,825	15,275							Cost of Salaries		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						2											
						2			1,360			13	13	13	216,837	127,391	141,318
															(375,000)	(750,000)	(750,000)
												1	1	1	5,863	10,990	12,248
															(80,000)	(80,000)	(80,000)
															4,300	4,300	
						1			1,737			1			1,737		
															(75,000)		
						1	1	1		7,544	7,771						
							1	1		6,000	6,200						
										13,544	13,971						
										6,417	3,372						
										1,690	1,690						
										14,000	14,000						
						1	2	2	13,135	35,651	33,033	1	3	3	13,135	49,927	44,701
															(100,000)	(100,000)	(100,000)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	HAITI-19, (continued)		
				7,023	7,990							Allowances and Statutory Travel		
				4,300	4,300							Fellowships		
1	2	2	21,876	26,148	27,565							Estimated Government Contribution		
3	7	5	48,615	96,535	67,140	11	13	13	215,477	127,391	141,318	TOTAL - HAITI		
												<u>MEXICO</u>		
												<u>MEXICO-14, Nursing Education</u> (For text see page 26)		
1	1	1		6,250	6,456							Nurse Educator, .2012		P3
				3,043	2,152							Allowances and Statutory Travel		
				720	720							Duty Travel		
				4,300	4,300							Fellowships		
1	1	1	8,862	14,313	13,628							Estimated Government Contribution		
												<u>MEXICO-15, State Health Services</u> (For text see page 26)		
1	1	1		6,100	6,300							Public Health Nurse, .2005		P3
				3,165	4,295							Allowances and Statutory Travel		
				1,600	1,600							Duty Travel		
				3,770	3,770							Fellowships		
1	1	1	9,457	14,635	15,965							Estimated Government Contribution		
												<u>MEXICO-22, Public Health Services</u> (Guanajuato) (For text see page 27)		
												Medical Officer, 4.354		P4
												Sanitary Engineer, 4.367		P4
												Health Educator, 4.2505		P4
												Public Health Nurse, 4.356		P3
												Sanitarian, 4.366		P2
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												<u>MEXICO-25, PAHO Public Health Adminis-</u> <u>tration Fellowships</u> (For text see page 27)		
			4,300	4,300	4,300							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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									7,020			1	2	2	28,896	26,148	27,565
															(100,000)	(100,000)	(100,000)
3			38,121			4	2	2	23,252	35,651	33,033	21	22	20	325,465	259,577	241,491
												1	1	1	8,862	14,313	13,628
															(30,000)	(30,000)	(30,000)
												1	1	1	9,457	14,635	15,965
															(400,000)	(400,000)	(400,000)
1	1	1		8,208	8,458												
1	1	1		8,042	8,292												
1	1	1		7,507	7,732												
1	1	1		6,437	6,662												
1	1	1		4,900	5,100												
				35,094	36,244												
				21,499	20,261												
				2,600	2,600												
				100	100												
				4,300													
5	5	5	55,400	63,593	59,205							5	5	5	55,400	63,593	59,205
															(400,000)	(400,000)	(400,000)
															4,300	4,300	4,300

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
		1	\$	\$	\$				\$	\$	\$	<u>MEXICO-26, Aedes aegypti Eradication</u> (For text see page 27)		P4 P2
		1			5,475							Medical Officer, .2015		
					3,600							Sanitarian, .2016		
					9,075							Cost of Salaries		
					9,098							Allowances and Statutory Travel		
					1,035							Duty Travel		
		2	4,600		19,208									
												Estimated Government Contribution		
												<u>MEXICO-28, Public Health Laboratory</u> (For text see page 27)		
				2,100	2,100							Short-term Consultants		
				1,800	1,800							Fees		
				750	750							Travel		
				1,525	1,525							Supplies and Equipment		
			6,175	6,175	6,175							Fellowships		
												Estimated Government Contribution		
												<u>MEXICO-30, School of Public Health</u> (For text see page 27)		P3
												Nurse Educator, 4.2506		
												Short-term Consultants		
												Fees		
												Travel		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>MEXICO-32, Medical Education</u> (For text see page 27)		
												Fellowships		
									26,212	4,370		<u>MEXICO-33, Dieldrin Toxicity Studies</u> (For text see page 28)		
												Contractual Services		
												<u>MEXICO-34, Veterinary Medicine Education</u> (For text see page 28)		
												Short-term Consultants		
												Fees		
												Travel		
												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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
														2	4,600		19,208
																	(300,000)
															6,175	6,175	6,175
															(50,000)	(50,000)	(50,000)
1	1	1		6,200	6,400												
				1,200	1,200												
				1,400	1,400												
				2,991	3,520												
				720	720												
				3,000	3,000												
1	1	1	15,181	15,511	16,240							1	1	1	15,181	15,511	16,240
															(250,000)	(250,000)	(250,000)
			11,000	4,300	4,300										11,000	4,300	4,300
															26,212	4,370	
				1,200	1,200												
				1,400	1,400												
				4,300	4,300												
			7,910	6,900	6,900										7,910	6,900	6,900

144

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				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	<u>MEXICO-35, Environmental Sanitation Training</u> (For text see page 28)	
												Short-term Consultants	
												Fees	
												Travel	
												Supplies and Equipment	
												<u>MEXICO-53, Malaria Eradication</u> (For text see page 28)	
												Chief Country Malaria Adviser, 4.338	P5
												Malariologist, 4.360	P4
						1	1	1		5,017	5,217	Sanitary Engineer, 4.361	P4
												Sanitarian, 9052, 4.369	P2
										5,017	5,217	Cost of Salaries	
										3,527	3,082	Allowances and Statutory Travel	
										2,400	2,400	Duty Travel	
										36,500	36,500	Supplies and Equipment	
										720	720	Common Services	
										3,000	3,000	Fellowships	
						1	1	1	50,459	51,164	50,919		
												Estimated Government Contribution	
2	2	4	33,394	39,423	59,276	1	1	1	76,671	55,534	50,919	TOTAL - MEXICO	
												<u>INTER-COUNTRY PROGRAMS</u>	
												<u>AMRO-93, Health Education (Zone II)</u> (For text see page 28)	
												Health Educator, 4.195	P4
												Allowances and Statutory Travel	
												Duty Travel	
												Supplies and Equipment	
												Estimated Government Contribution	
												<u>AMRO-114, Training Center for Malaria Eradication (Mexico)</u> (For text see page 28)	
						1	1	1		9,396	9,675	Chief, Training School, 9071	P5
						1	1	1		2,097	2,170	Clerk Stenographer, 9075	ML5
						1	1	1		1,315	1,359	Chauffeur-Messenger, 9125	ML2
										12,808	13,204	Cost of Salaries	
										5,593	3,838	Allowances and Statutory Travel	
										1,250	1,250	Duty Travel	
										32,020	32,020	Contractual Services	
						3	3	3	49,839	51,671	50,312		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				1,200	1,200												
				1,400	1,400												
				1,000	1,000												
			4,610	3,600	3,600										4,610	3,600	3,600
						1	1	1		9,396	9,675						
						1	1	1		8,833	9,083						
						1	1	1		8,312	8,562						
						1	1			5,483							
										32,024	27,320						
										9,615	11,285						
										4,230	4,230						
						4	4	3	58,563	45,869	42,835	5	5	4	109,022	97,033	93,754
															(6,000,000)	(6,500,000)	(6,500,000)
6	6	6	94,101	93,904	90,245	4	4	3	58,563	45,869	42,835	13	13	14	262,729	234,730	243,275
1	1	1		8,604	8,854												
				5,934	5,001												
				3,000	3,000												
				100	100												
1	1	1	16,966	17,638	16,955							1	1	1	16,966	17,638	16,955
															(20,000)	(20,000)	(20,000)
												3	3	3	49,839	51,671	50,312

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	AMRO-120, Malaria Technical Advisory Services (Zone II) (For text see page 29)		
							1	1		8,750	9,000	Chief Zone Malaria Adviser, 9245		
							1	1		7,300	7,525	Sanitary Engineer, 9246		
							1	1		6,000	6,200	Entomologist, 9247		
										22,050	22,725	Cost of Salaries		
										16,577	9,768	Allowances and Statutory Travel		
										6,000	6,000	Duty Travel		
							3	3		44,627	38,493			
												AMRO-144, Health Statistics (Zone II) (For text see page 29)		
												Health Statistician, 4.1171		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Estimated Government Contribution		
												AMRO-162, Epidemiology (Zone II) (For text see page 29)		
	1	1		5,475	7,469							Epidemiologist, .2006		
				4,833	3,421							Allowances and Statutory Travel		
				3,000	3,000							Duty Travel		
				100	100							Supplies and Equipment		
	1	1		13,408	13,990									
												Estimated Government Contribution		
												AMRO-178, Veterinary Public Health (Zone II) (For text see page 29)		
	1	1		9,125	9,375							Public Health Veterinarian, .2011		
				3,846	5,339							Allowances and Statutory Travel		
				2,180	2,180							Duty Travel		
	1	1		16,310	15,151	16,894								
												AMRO-205, Environmental Sanitation Training (Zone II) (For text see page 29)		
												Fellowships		
1	2	2	16,310	28,559	30,884	3	6	6	49,839	96,298	88,805	TOTAL - INTER-COUNTRY PROGRAMS		
15	19	19	266,086	318,421	308,494	22	27	27	431,037	373,469	372,283	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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													3	3		44,627	38,493
1	1	1		7,750	8,000												
				9,857	5,100												
				3,000	3,000												
				100	100												
1	1	1	15,339	20,707	16,200							1	1	1	15,339	20,707	16,200
															(20,000)	(20,000)	(20,000)
													1	1		13,408	13,990
															(20,000)	(20,000)	
												1	1	1	16,310	15,151	16,894
				8,000	8,000											8,000	8,000
2	2	2	32,305	46,345	41,155							6	10	10	98,454	171,202	160,844
13	11	11	193,956	178,651	168,609	10	11	10	107,968	129,148	135,590	60	68	67	999,047	999,689	984,976

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$			
1	1	1		11,200	11,600							Zone Representative, .400		D1
1	1	1		9,396	9,675							Assistant Zone Representative, .401		P5
												Sanitary Engineer, 4.202		P4
1	1	1		7,694	7,938							Nurse, .405		P4
1	1	1		9,500	9,500							Administrative Officer, .407		P4
1	1	1		5,100	5,300							Accounts and Budget Officer, .409		P2
												Records and Communications Clerk, .410		
1	1	1		3,565	3,565							General Services Clerk, .414		GL7
1	1	1		2,970	3,103							Accounting Assistant, .457		GL7
1	1	1		3,103	3,236							Personnel Clerk, .458		GL7
1	1	1		2,970	3,103							Accounting Clerk, .439, .3005, .3011		GL6
3	3	3		7,701	8,031							Secretary, .411, .415, .454, 9020, 9256		GL6
3	3	3		8,251	8,581	1	2	2		4,383	5,153	Clerk Stenographer, .413		GL6
1	1	1		2,750	2,750							Travel Clerk, .412		GL5
1	1	1		2,604	2,714							Clerk, .416		GL5
1	1	1		2,015	2,015							Chauffeur, .3006		GL3
1	1	1		1,412	1,512							Janitor-Messenger, .417		GL3
1	1	1		1,061	1,126							Estimated Local Wage Increases		GL2
				1,400	1,400					100	100			
				82,692	85,149					4,483	5,253	Cost of salaries		
				11,677	12,010					198	233	<u>Allowances</u>		
				1,829	1,884					99	116	Pension Fund		
				6,190	6,190							Insurance		
				4,650	4,650							Post Adjustment		
				1,800	1,800							Assignment		
										175	207	Dependents'		
												Repatriation Grant		
												Service Benefit		
				6,445	6,445							<u>Travel and Transportation</u>		
				2,900	2,350							Duty		
				300	300							Home Leave		
												<u>Hospitality</u>		
				3,506	3,155							<u>Common Services</u>		
				5,924	6,545							Space and Equipment Services		
				2,700	2,430							Other Services		
				750	750							Supplies and Materials		
				1,500	2,300							Fixed Charges and Claims		
												Acquisition of Capital Assets		
20	20	20	132,535	132,863	135,958	1	2	2	2,809	4,955	5,809	TOTAL		
												<u>BRITISH HONDURAS</u>		
												<u>BRITISH HONDURAS-1, Malaria</u>		
												<u>Eradication</u>		
												(For text see page 30)		
						1	1	1	7,431	7,656		Medical Officer, 9248		P4
						1	1	1	4,900	5,100		Sanitarian, 9210		P2
									12,331	12,756		Cost of Salaries		
									5,220	7,470		Allowances and Statutory Travel		
									6,742	7,492		Duty Travel		
									871	871		Supplies and Equipment		
						2	2	2	22,719	25,164	28,589	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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		8,896	9,146							1	1	1		11,200	11,600
												1	1	1		9,396	9,675
												1	1	1		8,896	9,146
												1	1	1		7,694	7,938
												1	1	1		9,500	9,500
												1	1	1		5,100	5,300
												1	1	1		3,565	3,565
												1	1	1		2,970	3,103
												1	1	1		3,103	3,236
												1	1	1		2,970	3,103
												3	3	3		7,701	8,031
												4	5	5		12,634	13,734
												1	1	1		2,750	2,750
												1	1	1		2,604	2,714
												1	1	1		2,015	2,015
												1	1	1		1,412	1,512
												1	1	1		1,061	1,126
																1,500	1,500
				8,896	9,146											96,071	99,548
				1,308	1,344											13,183	13,587
				200	206											2,128	2,206
				1,525	1,525											7,715	7,715
				1,200	1,200											5,850	5,850
				1,400	1,400											3,200	3,200
				150	150											150	150
																175	207
				4,555	4,555											11,000	11,000
					1,400											2,900	3,750
																300	300
				390	351											3,896	3,506
				658	727											6,582	7,272
				300	270											3,000	2,700
																750	750
																1,500	2,300
1	1	1	19,521	20,582	22,274							22	23	23	154,865	158,400	164,041

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>BRITISH HONDURAS-5, Public Health Services</u> (For text see page 30)		P4 P3
												Sanitary Engineer, 4.3510 Public Health Nurse, 4.3509		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
			4,300									<u>BRITISH HONDURAS-6, PAHO Public Health Administration Fellowships</u> (For text see page 30)		
												Fellowships		
			4,300			2	2	2	22,719	25,164	28,589	TOTAL - BRITISH HONDURAS		
												<u>COSTA RICA</u>		
												<u>COSTA RICA-2, Malaria Eradication</u> (For text see page 30)		P4 P2
						1	1	1		7,834	8,084	Medical Officer, 9035		
						2	2	2		8,767	9,179	Sanitarian, 9214, 9034		
										16,601	17,263	Cost of Salaries		
										10,676	12,463	Allowances and Statutory Travel		
										9,685	9,685	Duty Travel		
										2,000	2,000	Supplies and Equipment		
										836	418	Fellowships		
						3	3	3	42,344	39,798	41,829	Estimated Government Contribution		
												<u>COSTA RICA-14, Expansion of Local Public Health Services</u> (For text see page 31)		
			4,300	8,600	4,300							Fellowships		
												<u>COSTA RICA-15, PAHO Public Health Administration Fellowships</u> (For text see page 31)		
			4,300									Fellowships		
	1	1		6,100	6,300							<u>COSTA RICA-18, Advanced Nursing Education</u> (For text see page 31)		P3
												Public Health Nurse, .3007		
				2,100								Short-term Consultants		
				1,800								Fees		
				2,816	3,946							Travel		
												Allowances and Statutory Travel		

[illegible]

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	COSTA RICA-18, (continued)		
				300	300							Duty Travel		
				650	550							Supplies and Equipment		
				4,300	4,300							Fellowships		
	1	1	8,600	18,066	15,396									
												Estimated Government Contribution		
					4,300							<u>COSTA RICA-20, Planning and Organization of Hospital Services</u> (For text see page 31)		
												Fellowships		
	1	1	17,200	26,666	23,996	3	3	3	42,344	39,798	41,829	TOTAL - COSTA RICA		
												<u>EL SALVADOR</u>		
												<u>EL SALVADOR-2, Malaria Eradication</u> (For text see page 31)		
						1	1	1	7,792	8,042		Medical Officer, 9023		
						1	1	1	7,469	7,694		Sanitary Engineer, 9216, 4,468		
						2	2	2	9,967	10,367		Entomologist, 9207		
												Sanitarian, 9121, 9215		
									25,228	26,103		Cost of Salaries		
									14,532	16,552		Allowances and Statutory Travel		
									7,334	7,334		Duty Travel		
									9,000	9,000		Supplies and Equipment		
									1,606			Fellowships		
						4	4	4	67,562	57,700	58,989			
												Estimated Government Contribution		
												<u>EL SALVADOR-5, Health Demonstration Area</u> (For text see page 31)		
												Sanitary Engineer, 4.426		
												Public Health Nurse, 4.455		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		
												<u>EL SALVADOR-9, PAHO Public Health Administration Fellowships</u> (For text see page 32)		
			4,300	4,300	4,300							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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													1	1	8,600	18,066	15,396
															(8,000)	(10,200)	(10,200)
																	4,300
												3	4	4	59,544	66,464	65,825
						1											
						1			7,691			5	4	4	75,253	57,700	58,989
															(422,540)	(422,540)	(422,540)
						1	1										
						1	1			8,042							
										6,606							
										14,648							
										4,410							
										2,101							
						2	2		25,691	21,159		2	2		25,691	21,159	
															(220,000)	(220,000)	
															4,300	4,300	4,300

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 III		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>EL SALVADOR-10, Planning and Organization of Hospital Services</u> (For text see page 32)		P4
1	1			7,413								Medical Officer, .3008 Allowances and Statutory Travel Duty Travel		
				3,814										
				1,368										
1	1		8,021	12,595										
												<u>EL SALVADOR-11, National Public Health Nursing Services</u> (For text see page 32)		P3
												Public Health Nurse, 4.3514 Allowances and Statutory Travel Duty Travel		
												<u>EL SALVADOR-12, National Environmental Sanitation Services</u> (For text see page 32)		P4
												Sanitary Engineer, 4.3515 Allowances and Statutory Travel Duty Travel		
1	1		12,321	16,895	4,300	4	4	4	67,562	57,700	58,989	TOTAL - EL SALVADOR		
												<u>GUATEMALA</u> <u>GUATEMALA-1, Malaria Eradication</u> (For text see page 32)		P4 P4 P2 P1
						1	1	1		7,834	8,084	Medical Officer, 9130		
							1	1		7,525	7,750	Sanitary Engineer, 9255, 4.1094		
						1	1	1		5,084	5,284	Sanitarian, 9043		
							1	1		4,367	4,567	Sanitarian, 9217, 4.995		
										24,810	25,685	Cost of Salaries		
										15,160	20,529	Allowances and Statutory Travel		
										11,097	11,097	Duty Travel		
										11,000	11,000	Supplies and Equipment		
										3,635	264	Fellowships		
						2	4	4	41,652	65,702	68,575	Estimated Government Contribution		
												<u>GUATEMALA-6, Training of Nursing Auxiliaries</u> (For text see page 33)		
												Nurse Educator, 4.453, 4.3512		
												Allowances and Statutory Travel		
												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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1		8,021	12,595	
								1			6,831 2,363 225						
								1			9,419			1			9,419
								1			8,292 1,893 912 11,097			1			11,097
						3	2	2	33,382	21,159	20,516	8	7	6	113,265	95,754	83,805
						1											
						1											
						2			21,786			4	4	4	63,438	65,702	68,575
															(703,000)	(703,000)	(703,000)
2							1	1	6,962 1,021 620		7,187 1,309 620						

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	GUATEMALA-6, (continued)		P5 P4 P3 P2 P1
				1,000								Supplies and Equipment		
				8,600	4,300							Fellowships		
				9,600	4,300									
												Estimated Government Contribution		
												GUATEMALA-8, Public Health Services (For text see page 33)		
												Medical Officer, 4.442		
												Sanitary Engineer, 4.447		
												Public Health Nurse, 4.443		
												Nurse, 4.456		
												Sanitarian, 4.3502		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		
												GUATEMALA-11, Tuberculosis Control (For text see page 33)		P4
												Medical Officer, 4.461		
												Allowances and Statutory Travel		
												Duty Travel		
												Short-term Consultants		
												Fees		
												Travel		
				4,200										
				3,600										
				7,800										
												Estimated Government Contribution		
												GUATEMALA-12, PAHO Public Health Administration Fellowships (For text see page 34)		
			4,300	4,300	4,300							Fellowships		
			4,300	21,700	8,600	2	4	4	41,652	65,702	68,575	TOTAL - GUATEMALA		
												HONDURAS		P4 P4 P2
												HONDURAS-1, Malaria Eradication (For text see page 34)		
												Medical Officer, 9218, 4.1108		
												Sanitary Engineer, 9156		
												Sanitarian, 9219, 9220, 4.465		
						1	1	1	7,600	7,834		Cost of Salaries		
						1	1	1	7,507	7,732				
						1	2	2	8,750	9,150				
									23,857	24,716				

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
2			24,329				1	1		8,603	9,116	2	1	1	24,329	18,203	13,416
															(76,060)		
1	1	1		9,000	9,250												
1	1	1		8,479	8,729												
1	1	1		6,300	6,512												
	1	1		4,800	5,000												
1	1	1		3,750	3,950												
				32,329	33,441												
				24,248	26,169												
				1,425	3,750												
4	5	5	52,688	58,002	63,360							4	5	5	52,688	58,002	63,360
															(700,000)	(2,000,000)	(2,114,000)
						1	1	1		8,667	8,917						
										11,876	5,936						
										1,800	1,800						
						1	1	1	16,145	22,343	16,653	1	1	1	16,145	30,143	16,653
															(154,720)	(154,720)	(250,000)
															4,300	4,300	4,300
6	5	5	77,017	58,002	63,360	3	2	2	37,931	30,946	25,769	11	11	11	160,900	176,350	166,304
						1											
						1											

158

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>HONDURAS-1, (continued)</u>		
										17,013	14,384	Allowances and Statutory Travel		
										8,222	8,222	Duty Travel		
										6,000	6,000	Supplies and Equipment		
										2,154		Fellowships		
						2	4	4	30,288	57,246	53,322			
												Estimated Government Contribution		
												<u>HONDURAS-4, Public Health Services</u> (For text see page 34)		
												Medical Officer, 4.450		
												Sanitary Engineer, 4.451		
												Public Health Nurse, 4.452		
												Public Health Nurse, 4.462		
												Sanitarian, .3003, 4.3504		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
1			12,918											
												Estimated Government Contribution		
												<u>HONDURAS-6, PAHO Public Health</u> <u>Administration Fellowships</u> (For text see page 34)		
			4,300	8,600	4,300							Fellowships		
1			17,218	8,600	4,300	2	4	4	30,288	57,246	53,322	TOTAL - HONDURAS		
												<u>NICARAGUA</u>		
												<u>NICARAGUA-1, Malaria Eradication</u> (For text see page 34)		
						1	1	1	7,600	7,834		Medical Officer, 9053		
						1	1	1	7,469	7,694		Sanitary Engineer, 9054		
						2	2	2	9,967	10,367		Sanitarian, 9190, 9221		
									25,036	25,895		Cost of Salaries		
									16,791	17,812		Allowances and Statutory Travel		
									8,200	8,200		Duty Travel		
									5,000	5,000		Supplies and Equipment		
									3,335			Fellowships		
						4	4	4	53,624	58,362	56,107			
												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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						2			18,803			4	4	4	49,091	57,246	53,322
															(547,393)	(693,687)	(693,687)
						1	1	1		8,771	9,021						
						1	1	1		8,354	8,604						
						1	1	1		6,906	7,131						
						1	1	1		5,300	5,500						
							1			5,600							
										34,931	30,256						
										14,611	8,206						
										2,041	2,041						
						4	5	4	44,024	51,583	40,503	5	5	4	56,942	51,583	40,503
															(250,100)	(300,100)	(569,680)
															4,300	8,600	4,300
						6	5	4	62,827	51,583	40,503	9	9	8	110,333	117,429	98,125
												4	4	4	53,624	58,362	56,107
															(397,985)	(615,729)	(615,729)

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	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	NICARAGUA-5, Nursing Education (For text see page 35)	
												Nurse Educator, 4.448 Nurse Educator, 4.449, 4.459	
												Cost of Salaries	
												Allowances and Statutory Travel	
												Duty Travel	
												Supplies and Equipment	
												Fellowships	
												Estimated Government Contribution	
												NICARAGUA-7, PAHO Public Health Administration Fellowships (For text see page 35)	
			4,300	4,300	4,300							Fellowships	
			4,300	4,300	4,300	4	4	4	53,624	58,362	56,107	TOTAL - NICARAGUA	
												PANAMA	
												PANAMA-1, Public Health Services (For text see page 35)	
												Chief Country Adviser, 4.432 Medical Officer, 4.434 Sanitary Engineer, 4.433 Public Health Nurse, 4.435, 4.466	
												Cost of Salaries	
												Allowances and Statutory Travel	
												Duty Travel	
												Supplies and Equipment	
												Estimated Government Contribution	
												PANAMA-2, Malaria Eradication (For text see page 35)	
						1	1	1	8,000	8,250		Medical Officer, 9222, 4.1107	
						1	1	1	7,713	7,959		Sanitary Engineer, 9056	
						1	2	2	9,984	10,384		Sanitarian, 9223, 9224, 4.467	
									25,697	26,593		Cost of Salaries	
									18,576	18,490		Allowances and Statutory Travel	
									8,228	8,228		Duty Travel	
									8,150	8,150		Supplies and Equipment	
									4,072	4,072		Fellowships	
						2	4	4	33,915	64,723	65,533		
												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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		6,662	6,887												
2	1	2		4,950	9,950												
				11,612	16,837												
				9,274	11,751												
				1,110	1,110												
				1,550	1,965												
				8,600	8,600												
3	2	3	33,291	32,146	40,263							3	2	3	33,291	32,146	40,263
															(77,580)	(84,690)	(90,000)
															4,300	4,300	4,300
3	2	3	33,291	32,146	40,263							7	6	7	91,215	94,808	100,670
						1	1	1	9,083	9,333							
						1			9,000	9,250							
						2	2	2	13,999	14,449							
									32,082	33,032							
									8,846	10,813							
									4,000	4,000							
									3,000	3,000							
						5	4	4	64,336	47,928	50,845	5	4	4	64,336	47,928	50,845
															(3,508,789)	(3,508,789)	(3,609,000)
						1											
						1											
						2			22,568			4	4	4	56,483	64,723	65,533
															(433,059)	(433,059)	(433,059)

162

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	PANAMA-8, PAHO Public Health Administration Fellowships (For text see page 35)		
			4,300	4,300	4,300							Fellowships		
			4,300	4,300	4,300	2	4	4	33,915	64,723	65,533	TOTAL - PANAMA		

a) Contributions by Member Governments of INCAP.

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 III		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	AMRO-54, (continued)		
									a) 245,000	a) 245,000	a) 245,000	<u>INCAP Projects - Financed from Contributions and Grants</u>		
												Technical Programs		
3	2	2	52,486	39,435	41,744	17	17	17	355,000	350,000	350,000			
												<u>AMRO-86, Health Statistics (Zone III)</u> (For text see page 36)		
												Statistician, 4.1016		
												Allowances and Statutory Travel		
												Duty Travel		
												<u>AMRO-118, Malaria Technical Advisory Services (Zone III)</u> (For text see page 36)		
						1	1	1		9,375	9,650	Chief Zone Malaria Adviser, 9018		
						1	1	1		7,469	7,694	Sanitary Engineer, 9019		
						1	1	1		7,600	7,834	Administrative Methods Officer, 9039		
						1	1	1		6,607	6,832	Entomologist, 9089		
												Entomological Aide, 9186, 9187, 9188, 9189		
						4	4	4		15,800	16,600	Secretary, 9176		
						1	1	1		2,640	2,750			
										49,491	51,360	Cost of Salaries		
										31,735	35,521	Allowances and Statutory Travel		
										25,984	25,984	Duty Travel		
										363	363	Supplies and Equipment		
						9	9	9	95,045	107,573	113,228			
												<u>AMRO-121, Malaria Eradication Evaluation Teams</u> (For text see page 36)		
						1	2	2		16,663	19,338	Chief, Evaluation Team, 9094, 9225		
						1	2	2		12,962	15,181	Parasitologist, 9143, 9227		
						1	2	2		8,683	10,233	Sanitarian, 9168, 9228		
										38,308	44,752	Cost of Salaries		
										26,333	20,049	Allowances and Statutory Travel		
										30,600	30,600	Duty Travel		
						3	6	6	44,039	95,241	95,401			
												<u>AMRO-141, Health Education (Zone III)</u> (For text see page 37)		
												Health Educator, 4.670		
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		

a) 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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												20	19	19	407,486	389,435	391,744
1	1	1		7,562	7,792												
				6,137	4,543												
				3,000	3,195												
1	1	1	15,360	16,699	15,530							1	1	1	15,360	16,699	15,530
												9	9	9	95,045	107,573	113,228
												3	6	6	44,039	95,241	95,401
1	1	1		7,412	7,637												
				4,347	4,881												
				2,500	2,500												
1	1	1	6,342	14,259	15,018							1	1	1	6,342	14,259	15,018
															(30,000)	(30,000)	(30,000)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	AMRO-148, Laboratory for Production of Biologicals (Zone III) (For text see page 37)		
1	1	1		7,469	7,694							Medical Officer, .3010		
				4,546	5,681							Allowances and Statutory Travel		
				2,828	944							Duty Travel		
				3,000	7,500							Supplies and Equipment		
				8,600	4,300							Fellowships		
1	1	1	16,641	26,443	26,119							Estimated Government Contribution		
												AMRO-188, Veterinary Public Health (Zone III) (For text see page 37)		
												Public Health Veterinarian, 4.3513		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												AMRO-202, Leprosy Control (Zone III) (For text see page 37)		
	1	1		3,650	7,412							Medical Officer, .3012		
				4,560	4,538							Allowances and Statutory Travel		
				1,700	3,350							Duty Travel		
				1,920	1,425							Fellowships		
	1	1		11,830	16,725									
												AMRO-203, Epidemiology (Zone III) (For text see page 37)		
		1			5,475							Epidemiologist, .3013		
					5,690							Allowances and Statutory Travel		
					1,200							Duty Travel		
		1			12,365									
												AMRO-206, Environmental Sanitation Training (Zone III) (For text see page 37)		
												Fellowships		
4	4	5	69,127	77,708	96,953	29	32	32	494,084	552,814	558,629	TOTAL - INTER-COUNTRY PROGRAMS		
6	6	6	133,066	160,169	146,749	48	57	57	786,188	921,509	931,573	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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	16,641	26,443	26,119
															(25,000)	(25,000)	(25,000)
1	1	1		7,833	8,083												
				4,400	5,938												
				2,600	2,600												
				420	420												
1	1	1	16,050	15,253	17,041							1	1	1	16,050	15,253	17,041
													1	1		11,830	16,725
													1				12,365
				8,000	8,000											8,000	8,000
3	3	3	37,752	54,211	55,589	4			50,722			40	39	40	651,685	684,733	711,171
13	12	13	160,800	170,580	186,571	23	13	12	271,766	151,616	137,633	90	88	88	1,351,820	1,403,874	1,402,526

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1		10,400	10,800
												1	1	1		9,396	9,675
												1	1	1		7,694	7,937
												1	1	1		7,544	7,771
												1	1	1		7,896	8,146
												1	1	1		5,000	5,200
												1	1	1		2,684	2,791
												2	2	2		4,697	4,912
												6	6	6		13,543	14,011
												2	2	2		3,712	3,880
												1	1	1		1,117	1,165
												1	1	1		751	787
																1,500	1,500
																75,934	78,575
																10,758	11,136
																1,674	1,734
																5,800	5,800
																4,100	4,500
				2,500	2,500											12,300	12,300
																3,550	3,500
																300	300
																3,749	3,749
																9,916	9,916
																2,110	2,110
																248	248
																525	3,525
			5,460	4,078	4,078							19	19	19	125,213	130,964	137,393
						1	1	1		7,833	8,082						
										7,833	8,082						
										5,203	2,391						
										1,530	2,220						
						1	1	1	12,883	14,566	12,693	6	6	6	100,574	88,849	80,092
															(517,241)	(517,241)	(517,241)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	BOLIVIA-5, Nursing Education (For text see page 38)		P3 P2
												Nurse Educator, 4.651 Nurse Educator, 4.656		
												Allowances and Statutory Travel Duty Travel Fellowships		
												Estimated Government Contribution		
1	1	1		7,694	7,938							BOLIVIA-10, Public Health Services (For text see page 38)		P5
				6,754	4,091							Chief Country Adviser, .661		
				1,000	1,000							Allowances and Statutory Travel Duty Travel Fellowships		
				4,300	4,300									
1	1	1	22,100	19,748	17,329									
												Estimated Government Contribution		
												BOLIVIA-11, Joint Field Mission on Indigenous Populations (For text see page 38)		P4
												Medical Officer, 4.1022		
												Allowances and Statutory Travel Duty Travel		
												Estimated Government Contribution		
				1,400								BOLIVIA-12, Leprosy Control (For text see page 39)		
				1,200								Short-term Consultants Fees Travel		
				2,600										
												Estimated Government Contribution		
												BOLIVIA-13, WHO/TA Public Health Administration Fellowships (For text see page 39)		
												Fellowships		
1	1	1	22,100	22,348	17,329	5	5	5	87,691	74,283	67,399	TOTAL - BOLIVIA		

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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		7,375	7,600												
1				1,706	2,729												
				362	362												
				4,300	4,300												
2	1	1	17,457	13,743	14,991							2	1	1	17,457	13,743	14,991
															(21,552)	(21,552)	(21,552)
												1	1	1	22,100	19,748	17,329
															(4,540)	(4,540)	(4,540)
						1	1	1		8,479	8,729						
										1,657	3,094						
										1,500	2,221						
						1	1	1	10,615	11,636	14,044	1	1	1	10,615	11,636	14,044
															(1,580)	(1,580)	(1,580)
																2,600	
															(5,000)		
									745	4,300	4,300				745	4,300	4,300
2	1	1	17,457	13,743	14,991	2	2	2	24,243	30,502	31,037	10	9	9	151,491	140,876	130,756

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						1	1	1		9,146	9,396						
						1	1	1		8,042	8,292						
						1	1	1		8,167	8,417						
						2	2	2		13,112	13,537						
						1	1	1		5,450	5,650						
										43,917	45,292						
										13,363	12,501						
										5,250	6,561						
										10,000	10,000						
						6	6	6	67,305	72,530	74,354	6	6	6	67,305	72,530	74,354
															(917,653)	(917,653)	(917,653)
												10	10	10	176,187	161,657	170,569
															(2,147,239)	(2,147,239)	(2,147,239)
									20,000			1	1	1	38,401	12,879	14,237
															(211,043)	(211,043)	(211,043)
					4,300										2,866	12,900	4,300

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				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	<u>COLOMBIA-19, Leprosy Control</u> (For text see page 39) Medical Officer, 4.4504 Allowances and Statutory Travel Duty Travel	P4
												Estimated Government Contribution	
												<u>COLOMBIA-22, Aedes aegypti</u> <u>Eradication</u> (For text see page 40) All Purposes	
												Estimated Government Contribution	
												<u>COLOMBIA-24, School of Public Health</u> (For text see page 40) Professor of Microbiology, 4.4511 Short-term Consultants Fees Travel Fellowships	P4
												Estimated Government Contribution	
												<u>COLOMBIA-52, Yellow Fever, Carlos</u> <u>Finlay Institute</u> (For text see page 40) Cooperative Agreement	
			31,600	31,600	31,600							Estimated Government Contribution	
1	1	1	52,867	57,379	45,837	10	10	10	176,187	161,657	170,569	TOTAL - COLOMBIA	
												<u>ECUADOR</u> <u>ECUADOR-4, Public Health Services</u> (For text see page 40) Chief Country Adviser, 4.652 Public Health Nurse, 4.678 Cost of Salaries	P5 P3

COLOMBIA-19, Leprosy Control
(For text see page 39)

Medical Officer, 4.4504

Allowances and Statutory Travel

Duty Travel

Estimated Government Contribution

COLOMBIA-22, Aedes aegypti
Eradication
(For text see page 40)

All Purposes

Estimated Government Contribution

COLOMBIA-24, School of Public Health
(For text see page 40)

Professor of Microbiology, 4.4511

Short-term Consultants

Fees

Travel

Fellowships

Estimated Government Contribution

COLOMBIA-52, Yellow Fever, Carlos
Finlay Institute
(For text see page 40)

Cooperative Agreement

Estimated Government Contribution

TOTAL - COLOMBIA

ECUADOR

ECUADOR-4, Public Health Services
(For text see page 40)

Chief Country Adviser, 4.652

Public Health Nurse, 4.678

Cost of Salaries

P5
P3

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	ECUADOR-4, (continued)		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												ECUADOR-11, National Institute of Health		
												(For text see page 40)		
1	1	1		7,469	7,694							Bacteriologist, .4002		
				3,021	4,154							Allowances and Statutory Travel		
				369	369							Duty Travel		
				4,300								Fellowships		
1	1	1	7,110	15,159	12,217							Estimated Government Contribution		
												ECUADOR-14, Malaria Eradication		
												(For text see page 40)		
												Chief Country Malaria Adviser, 4.1127		
						3	1	1	7,694	7,938		Sanitary Engineer, 9230, 4.1149		
						1	3	3	15,200	15,800		Sanitarian, 9120, 9195, 9202		
						1	1	1	3,883	4,083		Sanitarian, 9041		
									26,777	27,821		Cost of Salaries		
									13,838	13,625		Allowances and Statutory Travel		
									14,028	14,228		Duty Travel		
									16,015	16,015		Supplies and Equipment		
									4,358			Fellowships		
						4	5	5	60,220	75,016	71,689	Estimated Government Contribution		
												ECUADOR-16, Nursing Education		
												(For text see page 41)		
												Nurse Educator, 4.687		
												Nurse Educator, 4.4500		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				5,857	5,773												
				2,831	2,831												
				8,600													
2	2	2	25,918	32,907	24,698							2	2	2	25,918	32,907	24,698
															(9,460)	(9,460)	(9,460)
												1	1	1	7,110	15,159	12,217
															(342,342)	(342,342)	(342,342)
						1	1	1		7,619	7,854						
										7,619	7,854						
										4,528	3,313						
										1,354	1,477						
						2	1	1	23,211	13,501	12,644	6	6	6	83,431	88,517	84,333
															(460,660)	(460,660)	(460,660)
1	1	1		6,550	6,775												
1	1	1		5,183	5,383												
				11,733	12,158												
				4,240	3,574												
				370	370												
				2,000													
				8,600													
2	2	2	25,937	26,943	16,102							2	2	2	25,937	26,943	16,102
															(20,420)	(20,420)	(20,420)

178

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	ECUADOR-18, Leprosy Control (For text see page 41)		
				1,400 1,200								Short-term Consultants Fees Travel		
				2,600										
												Estimated Government Contribution		
			2,866		8,600							ECUADOR-19, PAHO Public Health Administration Fellowships (For text see page 41)		
												Fellowships		
1	1	1		7,525 3,028 2,208 1,250	7,750 4,162 2,208							ECUADOR-20, Smallpox Eradication (For text see page 41)		
												Medical Officer, .4000		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
1	1	1	13,824	14,011	14,120									
												Estimated Government Contribution		
												ECUADOR-53, National Institute of Nutrition (For text see page 41)		
												Medical Nutritionist, 4.677		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Estimated Government Contribution		
2	2	2	23,800	31,770	34,937	4	5	5	60,220	75,016	71,689	TOTAL - ECUADOR		
												<u>PERU</u>		
												PERU-5, Malaria Eradication (For text see page 42)		
						1	1	1	7,792	8,042		Chief Country Malaria Adviser, 4.4502		
						5	5	5	23,750	24,750		Sanitary Engineer, 9059 Sanitarian, 9060, 9061, 9062, 9196, 9197, 4.4503		
									31,542	32,792		Cost of Salaries		
									19,101	24,089		Allowances and Statutory Travel		
									19,153	18,642		Duty Travel		
									38,075	38,075		Supplies and Equipment		
									9,114	9,114		Fellowships		
						6	6	6	119,127	116,985	122,712	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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
																2,600	
															(18,018)		
															2,866		8,600
												1	1	1	13,824	14,011	14,120
															(108,108)	(108,108)	(108,108)
						1	1	1		9,312	9,500						
										4,432	1,160						
										878	1,477						
										5,000	5,000						
						1	1	1	17,007	19,622	17,137	1	1	1	17,007	19,622	17,137
															(39,039)	(39,039)	(39,039)
4	4	4	51,855	59,850	40,800	3	2	2	40,218	33,123	29,781	13	13	13	176,093	199,759	177,207
						1	1	1		9,250	9,500						
						1	1	1		5,217	5,417						
										14,467	14,917						
										5,324	5,427						
										2,000	2,053						
						2	2	2	24,359	21,791	22,397	8	8	8	143,486	138,776	145,109
															(874,751)	(874,751)	(874,751)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>PERU-15, Nursing Education</u> (For text see page 42)		P3
												Nurse Educator, 4.4510		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		P5 P4 P3
												Fellowships		
												Estimated Government Contribution		
												<u>PERU-22, Public Health Services</u> (For text see page 42)		P5 P4 P3
												Chief Country Adviser, 4.681		
												Sanitary Engineer, 4.685		
												Nurse, 4.682		
												Cost of Salaries		P5 P4 P3
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		P5 P4 P3
												<u>PERU-23, Joint Field Mission on Indigenous Populations</u> (For text see page 42)		
												Duty Travel		
														P5 P4 P3
												<u>PERU-25, PAHO Public Health Administration Fellowships</u> (For text see page 42)		
			2,868	4,300	4,300							Fellowships		
												<u>PERU-26, Public Health Orientation Course</u> (For text see page 43)		P5 P4 P3
												Short-term Consultants		
				2,800 2,400	2,800 2,400 300							Fees Travel		
												Supplies and Equipment		
			14,828	5,200	5,500									P5 P4 P3
												Estimated Government Contribution		
												<u>PERU-28, Veterinary Medicine Education</u> (For text see page 43)		
												Short-term Consultants		

181

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		6,100	6,300												
				2,625	3,155												
				500	500												
				1,400													
				8,600	8,600												
1	1	1	14,480	19,225	18,555							1	1	1	14,480	19,225	18,555
															(3,180)	(3,180)	(3,180)
						1	1	1	8,813	9,063							
						1	1	1	8,771	9,021							
						1	1	1	6,200	6,400							
									23,784	24,484							
									8,808	8,819							
									1,350	3,399							
						3	3	3	37,731	33,942	36,702	3	3	3	37,731	33,942	36,702
															(10,000)	(10,000)	(10,000)
									1,000	1,000	1,000				1,000	1,000	1,000
															2,868	4,300	4,300
															14,828	5,200	5,500
															(5,000)	(5,000)	(5,000)
			3,590												3,590		

132

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	PERU-29, Tuberculosis Control (For text see page 43)		
					5,000							Fellowships		
												PERU-54, Typhus Vaccine (For text see page 43)		
				1,400 1,200								Short-term Consultants Fees Travel		
				2,600										
												Estimated Government Contribution		
			17,696	12,100	14,800	6	6	6	119,127	116,985	122,712	TOTAL - PERU		
												<u>INTER-COUNTRY PROGRAMS</u>		
												<u>AMRO-119, Malaria Technical Advisory Services (Zone IV)</u> (For text see page 43)		
						1	1	1	8,875	9,125		Chief Zone Malaria Adviser, 9090		P5
						1	1	1	8,271	8,521		Sanitary Engineer, 9091		P4
						2	2	2	14,938	15,388		Administrative Methods Officer, 9044, 9198		P4
						2	2	2	12,981	13,406		Entomologist, 9092, 9199		P3
						1	1	1	2,228	2,335		Secretary, 9174		IL5
									47,293	48,775		Cost of Salaries		
									18,772	25,537		Allowances and Statutory Travel		
									16,827	16,827		Duty Travel		
						7	7	7	80,168	82,892	91,139			
												<u>AMRO-143, Health Statistics (Zone IV)</u> (For text see page 43)		
												Health Statistician, 4.1126		P4
												Allowances and Statutory Travel		
												Duty Travel		
												<u>AMRO-179, Veterinary Public Health (Zone IV)</u> (For text see page 43)		
1	1	1		8,146	8,396							Public Health Veterinarian, .605		P4
				7,988	3,990							Allowances and Statutory Travel		
				2,500	2,500							Duty Travel		
1	1	1	15,860	18,634	14,886									
												<u>AMRO-207, Environmental Sanitation Training (Zone IV)</u> (For text see page 43)		
												Fellowships		
1	1	1	15,860	18,634	14,886	7	7	7	80,168	82,892	91,139	TOTAL - INTER-COUNTRY PROGRAMS		
5	5	5	132,323	142,231	127,789	32	33	33	523,393	510,833	523,508	TOTAL - ZONE IV PROGRAMS		

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS ZONE V		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			ZONE OFFICE - RIO DE JANEIRO (For text see page 16)	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
1	1	1		10,300	10,700							Zone Representative, .700	D1
	1	1		5,475	7,469							Medical Officer, 4.5505	P4
1	1	1		7,469	7,694							Sanitary Engineer, .5012	P4
1	1	1		7,896	8,146							Nurse, .5008	P4
1	1	1		2,377	2,447							Administrative Officer, .705	P4
3	3	3		7,099	7,312							Accounting Assistant, .706	RL6
1	1	1		1,961	2,026							Secretary, .707, .5004, .5011	RL6
1	1	1		1,454	1,570							Secretary, .718	RL5
1	1	1		1,613	1,671							Clerk Stenographer, .708	RL4
1	1	1		855	885							Clerk, .709	RL4
1	1	1		728	758							Chauffeur, .711	RL2
1	1	1		2,805	2,962							Janitor-Office Boy, .712	RL2
												Estimated Local Wage Increases	
				50,032	53,640							Cost of salaries	
												Allowances	
				6,832	7,964							Pension Fund	
				1,061	1,141							Insurance	
				4,425	4,700							Assignment	
				3,300	3,700							Dependents'	
												Travel and Transportation	
				7,385	7,385							Duty	
				2,300	5,400							Home Leave	
												Recruitment and Repatriation	
				300	300							Hospitality	
												Common Services	
				1,440	1,440							Space and Equipment Services	
				7,335	7,335							Other Services	
				1,080	1,080							Supplies and Materials	
				350	350							Fixed Charges and Claims	
				3,500	500							Acquisition of Capital Assets	
12	13	13	70,006	89,340	94,935							TOTAL	

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS ZONE V		GRADE
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-8, National Virus Laboratory Services</u> (For text see page 44) Virologist, 4.5507 Allowances and Statutory Travel Supplies and Equipment	P4	
												Estimated Government Contribution		
												<u>BRAZIL-18, National Food and Drug Service</u> (For text see page 44) Short-term Consultants Fees Travel Fellowships		
												Estimated Government Contribution		
												<u>BRAZIL-19, School of Public Health (Rio de Janeiro)</u> (For text see page 44) Professor of Public Health, 4.720 Short-term Consultants Fees Travel Fellowships	P4	
												Estimated Government Contribution		
												<u>BRAZIL-24, Malaria Eradication</u> (For text see page 44) Sanitary Engineer, 9028 Allowances and Statutory Travel Duty Travel Supplies and Equipment Fellowships	P4	
						1	1	1		8,854	9,104			
										3,028	5,765			
										1,630	1,630			
										39,144	75,394			
										20,000	20,000			
						1	1	1	116,719	72,656	111,893	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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						1	1	1		7,375	7,600						
										1,257	1,791						
										5,000	5,000						
						1	1	1	6,886	13,632	14,391	1	1	1	6,886	13,632	14,391
															(50,000)	(50,000)	(50,000)
				1,800	1,800												
				2,100	2,100												
				6,000	6,000												
			2,375	9,900	9,900										2,375	9,900	9,900
															(30,000)	(30,000)	(30,000)
1				1,200	1,200												
				1,400	1,400												
				4,300	4,300												
1			20,421	6,900	6,900							1			20,421	6,900	6,900
															(150,000)	(150,000)	(150,000)
												1	1	1	116,719	72,656	111,893
															(3,000,000)	(3,000,000)	(3,000,000)

188

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-28, PAHO Public Health Administration Fellowships</u> (For text see page 45) Fellowships		
			8,600	4,300	8,600									
												<u>BRAZIL-31, Rehabilitation Training Center</u> (For text see page 45) Medical Officer, 4.5003 Allowances and Statutory Travel Duty Travel		P4
												Estimated Government Contribution <u>BRAZIL-33, Training for Laboratory Technicians</u> (For text see page 45) Laboratory Technician, .5001 Allowances and Statutory Travel Supplies and Equipment		P4
	1	1		5,475	7,469									
				4,546	3,021									
				2,000	2,000									
	1	1		12,021	12,490									
												Estimated Government Contribution <u>BRAZIL-34, Seminar on Diarrheal Diseases</u> (For text see page 45) All Purposes		
			15,100											
												<u>BRAZIL-35, School of Public Health (Sao Paulo)</u> (For text see page 45) Short-term Consultants Fees Travel Supplies and Equipment Fellowships		
												Estimated Government Contribution <u>BRAZIL-37, Dental Health Education</u> (For text see page 45) All Purposes		
			3,000						a) 6,000					
												Estimated Government Contribution		

a) Grant from 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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															8,600	4,300	8,600
						1	1	1		7,875	8,125						
										2,306	1,344						
										430	430						
						1	1	1	9,724	10,611	9,899	1	1	1	9,724	10,611	9,899
															(25,000)	(25,000)	(25,000)
													1	1		12,021	12,490
																(25,000)	(25,000)
															15,100		
				1,200	1,200												
				1,400	1,400												
				6,000	6,000												
				5,000	5,000												
			10,600	13,600	13,600										10,600	13,600	13,600
															(150,000)	(150,000)	(150,000)
															9,000		
															(25,000)		

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 V		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-38, Smallpox Eradication</u> (For text see page 46)		
				2,000	2,000							Fellowships		
			3,220	2,000	2,000				1/4,540			Estimated Government Contribution		
1	1	1		7,300	7,525							<u>BRAZIL-39, Public Health Services</u> (Mato Grosso) (For text see page 46)		
1	1	1		6,000	6,200							Sanitary Engineer, .5009 Public Health Nurse, .5010		
				13,300	13,725							Cost of Salaries		
				2,100	2,100							Short-term Consultants		
				1,800	1,800							Fees		
				5,795	8,059							Travel		
				700	700							Allowances and Statutory Travel		
				6,000	6,000							Duty Travel		
2	2	2	12,300	29,695	32,384							Fellowships		
												Estimated Government Contribution		
												<u>BRAZIL-41, Malaria Eradication</u> (Sao Paulo) (For text see page 46)		
						1	1	1	7,600	7,833		Sanitary Engineer, 9138		
						4	4	4	20,267	21,067		Sanitarian, 9139, 9140, 9208, 9209		
									27,867	28,900		Cost of Salaries		
									2,100			Short-term Consultants		
									1,800			Fees		
									20,724	17,569		Travel		
									5,820	5,820		Allowances and Statutory Travel		
									15,111	15,111		Duty Travel		
									2,330			Supplies and Equipment		
												Fellowships		
						5	5	5	63,162	75,752	67,400	Estimated Government Contribution		
												<u>BRAZIL-42, Rabies Control</u> (For text see page 46)		
												Short-term Consultants		
												Fees		
												Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		

[illegible]

1972

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>BRAZIL-43, Preventive Dentistry</u> (For text see page 47)		
												Short-term Consultants		
				1,400	1,400							Fees		
				1,200	1,200							Travel		
				2,000								Supplies and Equipment		
				4,600	2,600									
												Estimated Government Contribution		
												<u>BRAZIL-44, Teaching of Public Health in Schools of Veterinary Medicine</u> (For text see page 47)		
				4,300	4,300							Fellowships		
												<u>BRAZIL-45, Environmental Sanitation Training</u> (For text see page 47)		
												Fellowships		
												<u>BRAZIL-48, Leprosy Control</u> (For text see page 47)		
				1,400	1,400							Short-term Consultants		
				1,200	1,200							Fees		
				2,600	2,600							Travel		
												<u>BRAZIL-51, Yellow Fever Laboratory</u> (For text see page 47)		
1	1	1		1,080	1,080							Consultant, .714		
				24	24							Allowances and Statutory Travel		
				5,000	5,000							Supplies and Equipment		
1	1	1	6,390	6,104	6,104							Estimated Government Contribution		
3	4	4	48,610	65,620	71,078	6	6	6	190,421	148,408	179,293	TOTAL - BRAZIL		
												<u>INTER-COUNTRY PROGRAMS</u>		
												<u>AMRO-137, Training Center for Malaria Eradication (Sao Paulo)</u> (For text see page 47)		
						1						Secretary, 9137		
										2,800	2,800	Short-term Consultants		
										2,400	2,400	Fees		
										8,586	8,657	Travel		
												Grant		
						1			14,914	13,786	13,857			

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
																4,600	2,600
															(10,000)	(10,000)	
																4,300	4,300
			2,000												2,000		
																2,600	2,600
												1	1	1	6,390	6,104	6,104
															(75,000)	(75,000)	(75,000)
1	1	1	37,231	60,160	54,318	2	2	2	16,610	24,243	24,290	12	13	13	292,872	298,431	328,979
												1			14,914	13,786	13,857

194

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$			
						1	1	1		9,312	9,575	AMRO-139, Malaria Technical Advisory Services (Zones V and VI) (For text see page 48)		
										5,297	4,036	Chief Zone Malaria Adviser, 9055		
										2,765	2,765	Allowances and Statutory Travel		
												Duty Travel		
						1	1	1	15,786	17,374	16,376			
												AMRO-189, Veterinary Public Health (Zone V) (For text see page 48)		
												Public Health Veterinarian, 4.701		
												Allowances and Statutory Travel		
												Duty Travel		
	1	1		5,475	7,300							AMRO-201, Health Statistics (Zone V) (For text see page 48)		
				4,545	2,995							Statistician, .5002		
				250	250							Allowances and Statutory Travel		
					4,300							Duty Travel		
	1	1	2,877	10,270	14,845							Fellowships		
												Estimated Government Contribution		
												AMRO-208, Environmental Sanitation Training (Zone V) (For text see page 48)		
												Junior Sanitary Engineer, 4.1097		
												Allowances and Statutory Travel		
												Duty Travel		
												Fellowships		
	1	1	2,877	10,270	14,845	2	1	1	30,700	31,160	30,233	TOTAL - INTER-COUNTRY PROGRAMS		
3	5	5	51,487	75,890	85,923	8	7	7	221,121	179,568	209,526	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			NUMBER OF POSTS			ESTIMATED EXPENDITURE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	15,786	17,374	16,376
1	1	1		7,917 3,742 2,000	8,167 7,285 2,000												
1	1	1	16,839	13,659	17,452							1	1	1	16,839	13,659	17,452
													1	1	2,877	10,270	14,845
																(5,000)	(5,000)
	1	1		2,447 263 1,157 4,000	2,518 271 1,157 4,000												
	1	1		7,867	7,946								1	1		7,867	7,946
1	2	2	16,839	21,526	25,398							3	4	4	50,416	62,956	70,476
2	3	3	54,070	81,686	79,716	2	2	2	16,610	24,243	24,290	15	17	17	343,288	361,387	399,455

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE - BUENOS AIRES</u> (For text see page 16)		
1	1	1		12,000	12,000							Zone Representative, .800		D1
1	1	1		9,396	9,675							Assistant Zone Representative, .804		P5
	1	1		5,475	7,469							Sanitary Engineer, .6021		P4
1	1	1		7,896	8,146							Nurse, .805		P4
1	1	1		7,896	8,146							Administrative Officer, .806		P4
1	1	1		5,100	5,300							Accounting and Budget Officer, .807		P2
1	1	1		1,952	2,026							Accounting Clerk, .836		BAL6
3	3	3		4,210	4,394							Secretary, .808, .811, .843		BAL5
												Clerk Stenographer, .809, .810, .6013, .6022		BAL5
3	4	4		4,951	5,468							Clerk, .812, .6012		BAL4
2	2	2		2,036	2,132							Chauffeur, .813		BAL2
1	1	1		652	683							Messenger, .814		BAL2
1	1	1		670	700							Estimated Local Wage Increases		BAL2
				1,000	1,000									
				63,234	67,139							Cost of salaries		
												<u>Allowances</u>		
				9,050	9,617							Pension Fund		
				1,402	1,487							Insurance		
				6,050	6,050							Assignment		
				5,700	5,700							Dependents'		
												<u>Travel and Transportation</u>		
				7,525	7,525							Duty		
				720	7,100							Home Leave		
				2,300								Recruitment and Repatriation		
				300	300							<u>Hospitality</u>		
												<u>Common Services</u>		
				2,475	2,475							Space and Equipment Services		
				7,065	7,065							Other Services		
				2,700	2,700							Supplies and Materials		
				250	250							Fixed Charges and Claims		
				2,100	500							Acquisition of Capital Assets		
16	18	18	109,365	110,871	117,908							TOTAL		
												<u>ARGENTINA</u>		
												<u>ARGENTINA-2, Smallpox Eradication</u> (For text see page 49)		
									1/2,600			Supplies and Equipment		
												Estimated Government Contribution		
												<u>ARGENTINA-3, Nursing Education</u> (Cordoba and El Chaco) (For text see page 49)		
												Nurse Educator, 4.854, 4.855, 4.861, 4.6508		P3
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		

[illegible]

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-4, National Institute of Microbiology</u> (For text see page 49) Pharmacologist, 4.6500 Bacteriologist, 4.6501 Virologist, 4.6502 Cost of Salaries Allowances and Statutory Travel Duty Travel Fellowships		P4 P4 P4
												Estimated Government Contribution		
		1 1 1 1			5,475 5,475 4,500 3,600 19,050 17,639 835 8,600							<u>ARGENTINA-7, Public Health Services</u> (For text see page 49) Medical Officer, .6024, 4.863 Sanitary Engineer, .6025, 4.6504 Health Educator, 4.6510 Public Health Nurse, .6026, 4.860 Sanitarian, .6027 Cost of Salaries Allowances and Statutory Travel Duty Travel Fellowships		P4 P4 P4 P3 P2
		4			46,124							Estimated Government Contribution		
												<u>ARGENTINA-8, Malaria Eradication</u> (For text see page 50) 7,800 7,800 Drugs 10,000 10,000 Fellowships		
									18,300	17,800	17,800	Estimated Government Contribution		
												<u>ARGENTINA-11, Rabies Control</u> (For text see page 50) Short-term Consultants Fees Travel		
												Estimated Government Contribution		
												<u>ARGENTINA-13, PAHO Public Health Administration Fellowships</u> (For text see page 50) Fellowships		
			8,600	8,600	8,600									

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		7,469	7,694												
1	1	1		7,469	7,694												
1	1	1		7,469	7,694												
				22,407	23,082												
				8,491	10,092												
				1,000	1,000												
				4,300	4,300												
3	3	3	10,765	36,198	38,474							3	3	3	10,765	36,198	38,474
															(55,500)	(55,500)	(61,700)
						1	1	1	9,083	9,333							
						1	1	1	8,750	9,000							
						1	1	1	7,319	7,544							
						1	1	1	7,037	7,262							
									32,189	33,139							
									11,135	9,499							
									390	390							
						4	4	4	36,722	43,714	43,028	4	4	8	36,722	43,714	89,152
															(1,800,000)	(1,800,000)	(1,800,000)
															18,300	17,800	17,800
															(377,622)	(377,622)	(377,622)
				600 700													
			2,600	1,300											2,600	1,300	
															(41,958)	(55,944)	
															8,600	8,600	8,600

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				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-15, Nutrition</u> (For text see page 50) Short-term Consultants Fees Travel Fellowships	
				2,800 2,400 4,300	2,800 2,400 4,300								
				9,500	9,500								
													Estimated Government Contribution
													<u>ARGENTINA-17, School of Public Health</u> (For text see page 50) Professor of Public Health, 4.6509 Short-term Consultants Fees Travel Allowances and Statutory Travel Duty Travel Supplies and Equipment Fellowships
													Estimated Government Contribution
													<u>ARGENTINA-18, Medical Education</u> (For text see page 50) Short-term Consultants Fees Travel Fellowships
													<u>ARGENTINA-20, Tuberculosis Control</u> (For text see page 51) Medical Officer, .6014 Statistician, .6032 Nurse, .6031 Cost of Salaries Allowances and Statutory Travel Duty Travel Fellowships
	1	1		5,475	4,950								P4
		1		4,500									P3
	1	1		3,600	7,469								P2
				9,075	16,919								
				8,643	9,814								
				4,800	6,800								
					5,000								
	2	3		22,518	38,533								
													Estimated Government Contribution

201

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			
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
																9,500	9,500
																(300,000)	(300,000)
1	1	1		7,469	7,694												
				1,800	1,800												
				2,100	2,100												
				2,831	3,365												
				425	425												
				2,000													
				4,300	4,300												
1	1	1	13,495	20,925	19,684							1	1	1	13,495	20,925	19,684
															(500,000)	(500,000)	(500,000)
				1,200	1,200												
				1,400	1,400												
				8,600	8,600												
			6,900	11,200	11,200										6,900	11,200	11,200
													2	3		22,518	38,533
															(323,000)	(323,000)	

202

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					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>ARGENTINA-23, Nursing Education (Rosario)</u> (For text see page 51)		
2	2	2		12,501	12,912							Nurse Educator, .6008, .6009		P3
				4,687	3,838							Allowances and Statutory Travel		
				760	890							Duty Travel		
				1,500	1,500							Supplies and Equipment		
				8,600	8,600							Fellowships		
2	2	2	22,230	28,048	27,740									
												Estimated Government Contribution		
												<u>ARGENTINA-24, Planning and Organization of Hospital Services</u> (For text see page 51)		
1	1	1		7,980	8,230							Hospital Administrator, .6015		P4
				4,198	4,785							Allowances and Statutory Travel		
				1,100	1,100							Duty Travel		
				4,300	4,300							Fellowships		
1	1	1	16,935	17,578	18,415									
												Estimated Government Contribution		
												<u>ARGENTINA-25, Training of Professional and Auxiliary Nursing Personnel</u> (For text see page 51)		
	1	1		4,500	6,150							Nurse Educator, .6016		P3
				4,401	2,824							Allowances and Statutory Travel		
				700	1,000							Duty Travel		
					1,000							Supplies and Equipment		
				4,300	4,300							Fellowships		
	1	1		13,901	15,274									
												Estimated Government Contribution		
												<u>ARGENTINA-26, National Institute of Rehabilitation</u> (For text see page 51)		
				1,400	2,100							Short-term Consultants		
				1,200	1,800							Fees		
				4,300	4,300							Travel		
												Fellowships		
			1,347	6,900	8,200									
												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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													1	1		17,451	17,224
															(8,000,000)	(8,000,000)	
												4	3	3	51,744	38,622	40,328
															(368,160)	(368,160)	(368,160)
1	4	4	33,760	69,623	69,358	8	8	8	71,917	77,083	75,791	16	22	27	227,433	327,624	392,887
									14,423	6,300	6,300				18,723	10,600	10,600
										1,460	791						
										4,300	4,300						
										5,760	5,091					5,760	5,091
																(250,000)	(250,000)

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	CHILE-20, Midwifery Education (For text see page 52)		P3
												Nurse Educator, 4.851		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
		1			5,475							CHILE-21, Rehabilitation Center (For text see page 52)		P4
				2,800								Medical Officer, .6028		
				2,400								Short-term Consultants		
					4,546							Fees		
												Travel		
				2,000	2,000							Allowances and Statutory Travel		
				4,300	8,600							Supplies and Equipment		
		1		11,500	20,621							Fellowships		
												CHILE-22, Institute of Occupational Health (For text see page 53)		
				4,200								Short-term Consultants		
				3,600								Fees		
					3,000							Travel		
					4,300							Supplies and Equipment		
												Fellowships		
			16,010	15,100										
												CHILE-27, Public Health Services (Ovalle-Copiapo) (For text see page 53)		
				1,400	2,800							Short-term Consultants		
				1,200	2,400							Fees		
												Travel		
				2,600								Supplies and Equipment		
			5,200	5,200	5,200									
												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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		6,719	6,944												
				1,958	3,192												
				880	880												
				1,000													
				8,600	4,300												
1	1	1	14,868	19,157	15,316							1	1	1	14,868	19,157	15,316
															(250,000)	(250,000)	(250,000)
														1		11,500	20,621
															16,010	15,100	
															5,200	5,200	5,200
															(500,000)	(500,000)	(500,000)

208

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>CHILE-29, Advanced Nursing Education</u> (For text see page 53)		P4
												Nurse Educator, 4.1120		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												<u>CHILE-30, Training for Laboratory Technicians</u> (For text see page 53)		
					1,400							Short-term Consultants		
					1,200							Fees		
					2,600							Travel		
												<u>CHILE-31, School of Public Health</u> (For text see page 53)		
												Short-term Consultants		
												Fees		
												Travel		
												Duty Travel		
												Fellowships		
												Estimated Government Contribution		
												<u>CHILE-34, Training of Nursing Auxiliaries</u> (For text see page 54)		P3
												Nurse Educator, 4.6511		
												Allowances and Statutory Travel		
												Duty Travel		
												<u>CHILE-35, Nutrition</u> (For text see page 54)		
					4,300							Fellowships		
												<u>CHILE-36, Aedes aegypti Eradication</u> (For text see page 54)		P2
1	1			2,400								Sanitarian, .6023		
				3,485								Allowances and Statutory Travel		
1	1		12,724	5,885										

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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1		7,896	8,146												
				2,135	3,642												
				880	880												
				500	500												
				4,300	4,300												
1	1	1	18,130	15,711	17,468							1	1	1	18,130	15,711	17,468
															(200,000)	(200,000)	(200,000)
																	2,600
				2,400	2,400												
				2,800	2,800												
				1,000	1,000												
				5,000	5,500												
			11,200	11,200	11,700										11,200	11,200	11,700
															(400,000)	(400,000)	(400,000)
							1	1		6,050	6,250						
										1,390	1,921						
										500	500						
							1	1		7,940	8,671		1	1		7,940	8,671
																	4,300
												1	1		12,724	5,885	

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>CHILE-37, Medical Education</u> (For text see page 54)		
					5,600							Short-term Consultants		
					4,800							Fees		
					1,000							Travel		
												Supplies and Equipment		
					11,400									
1	1	1	38,234	41,985	48,421							TOTAL - CHILE		
												<u>PARAGUAY</u>		
												<u>PARAGUAY-1, Malaria Eradication</u> (For text see page 54)		
						1	1	1	7,356	7,581		Medical Officer, 9136, 4.818		
							1	1	7,601	7,834		Sanitary Engineer, 9234		
						1	2	2	10,050	10,450		Sanitarian, 9235, 9236, 4.856		
									25,007	25,865		Cost of Salaries		
									10,990	11,775		Allowances and Statutory Travel		
									7,360	7,360		Duty Travel		
									3,600	7,500		Supplies and Equipment		
									4,300	4,300		Fellowships		
						2	4	4	16,716	51,257	56,800	Estimated Government Contribution		
												<u>PARAGUAY-9, Leprosy Control</u> (For text see page 54)		
												Leprologist, 4.850		
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		
												<u>PARAGUAY-10, Public Health Services</u> (For text see page 55)		
	1	1		7,600	7,834							Chief Country Adviser, 4.830		
												Sanitary Engineer, 4.831		
		1										Administrative Methods Officer, .6010		
					3,600							Bacteriologist, 4.822		
												Epidemiologist, 4.862		
												Public Health Nurse, 4.823		
												Sanitarian, .6029		
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
	1	2		11,970	19,925							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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
																	11,400
2	2	2	44,198	46,068	44,484		1	1	14,423	20,000	20,062	3	4	4	96,855	108,053	112,967
						1											
						1											
						2			19,220			4	4	4	35,936	51,257	56,800
															(195,000)	(195,000)	(203,617)
1	1	1		7,412	7,637												
				2,822	3,356												
				276	276												
1	1	1	8,142	10,510	11,269							1	1	1	8,142	10,510	11,269
															(45,200)	(48,500)	(48,500)
						1	1	1	9,167	9,417							
						1	1	1	8,938	9,188							
						1	1	1	9,104	9,354							
						1	1	1	7,319	7,544							
						1	1	1	6,587	6,812							
									41,115	42,315							
									12,681	8,903							
									2,520	3,700							
						5	5	5	51,475	56,316	54,918	5	6	7	51,475	68,286	74,843
															(1,004,700)	(1,004,700)	(1,147,920)

212

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>PARAGUAY-13, PAHO Public Health Administration Fellowships</u> (For text see page 55)		
			4,300	4,300	4,300							Fellowships		
1			11,081									<u>PARAGUAY-16, Administrative Methods and Practices in Public Health</u> (For text see page 55)		
												Administrative Methods Officer, .6010		P4
1	1	2	15,381	16,270	24,225	2	4	4	16,716	51,257	56,800	TOTAL - PARAGUAY		
												<u>URUGUAY</u>		
												<u>URUGUAY-5, Public Health Services</u> (For text see page 55)		
												Chief Country Adviser, 4.846 Sanitary Engineer, 4.847 Public Health Nurse, 4.848		P5 P4 P3
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Estimated Government Contribution		
												<u>URUGUAY-9, Chagas' Disease</u> (For text see page 56)		
												Short-term Consultants Fees Travel		
												Fellowships		
					5,100									
												Estimated Government Contribution		
												<u>URUGUAY-10, PAHO Public Health Administration Fellowships</u> (For text see page 56)		
			4,300	4,300	4,300							Fellowships		
1	1	1		6,150 3,600	6,350 4,950							<u>URUGUAY-13, Training of Public Health Personnel</u> (For text see page 56)		
	1	1		9,750 6,901 500 1,000 4,300	11,300 6,345 500 4,300							Nurse Educator, .6018 Sanitarian, .6020		P3 P2
												Cost of Salaries		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Fellowships		
1	2	2	13,600	22,451	22,445									
												Estimated Government Contribution		

WORLD HEALTH ORGANIZATION												T O T A L S					
REGULAR BUDGET						TECHNICAL ASSISTANCE FUNDS						NUMBER OF POSTS			ESTIMATED EXPENDITURE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															4,300	4,300	4,300
												1			11,081		
1	1	1	8,142	10,510	11,269	7	5	5	70,695	56,316	54,918	11	11	12	110,934	134,353	147,212
						1	1	1		9,396	9,675						
						1	1	1		9,188	9,438						
						1	1	1		6,944	7,169						
										25,528	26,282						
										11,251	9,336						
										1,100	1,100						
						3	3	3	38,205	37,879	36,718	3	3	3	38,205	37,879	36,718
															(1,500,000)	(1,500,000)	(1,500,000)
																	5,100
																	(100,000)
															4,300	4,300	4,300
												1	2	2	13,600	22,451	22,445
															(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 VI		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>URUGUAY-15, Waterworks Operators School</u> (For text see page 56)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Estimated Government Contribution		
												<u>URUGUAY-16, Chronic Diseases</u> (For text see page 56)		
				2,100 1,800	2,100 1,800							Short-term Consultants Fees Travel		
				2,500	2,500							Fellowships		
				6,400	6,400							Estimated Government Contribution		
1	2	2	17,900	33,151	38,245							TOTAL - URUGUAY		
												<u>INTER-COUNTRY PROGRAMS</u>		
1	1	1		5,475	7,469							<u>AMRO-159, Health Statistics (Zone VI)</u> (For text see page 56)		
				4,547	3,021							Statistician, .6002		
				1,800	1,800							Allowances and Statutory Travel		
												Duty Travel		
1	1	1	6,502	11,822	12,290							<u>AMRO-163, Epidemiology (Zone VI)</u> (For text see page 57)		
				8,313	8,562							Epidemiologist, .6003		
				4,747	7,285							Allowances and Statutory Travel		
				2,345	2,345							Duty Travel		
1	1	1	16,261	15,405	18,192							<u>AMRO-209, Environmental Sanitation Training (Zone VI)</u> (For text see page 57)		
												Fellowships		
		1			6,563							<u>AMRO-210, Medical Education (Zone VI)</u> (For text see page 57)		
					4,860							Medical Educator, .6030		
					2,500							Allowances and Statutory Travel		
		1			13,923							Duty Travel		
2	2	3	22,763	27,227	44,405							TOTAL - INTER-COUNTRY PROGRAMS		
12	16	23	195,134	281,751	385,234	2	4	4	37,616	69,057	74,600	TOTAL - ZONE VI 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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
				2,400	2,400												
				2,800	2,800												
				1,500	1,000												
				6,700	6,200											6,700	6,200
																(100,000)	(100,000)
																6,400	6,400
																(50,000)	(50,000)
				6,700	6,200	3	3	3	38,205	37,879	36,718	4	5	5	56,105	77,730	81,163
												1	1	1	6,502	11,822	12,290
												1	1	1	16,261	15,405	18,192
				12,000	12,000											12,000	12,000
														1			13,923
				12,000	12,000							2	2	3	22,763	39,227	56,405
4	7	7	86,100	144,901	143,311	18	17	17	195,240	191,278	187,489	36	44	51	514,090	686,987	790,634

216

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>CANADA</u>		
												<u>CANADA-1, WHO Public Health Administration Fellowships</u> (For text see page 58)		
												Fellowships		
												<u>CANADA-2, Consultants in Specialized Fields of Public Health</u> (For text see page 58)		
												Short-term Consultants Fees Travel		
												TOTAL - CANADA		
												<u>UNITED STATES</u>		
												<u>UNITED STATES-7 (WHO), UNITED STATES-11 (PAHO), Public Health Administration Fellowships</u> (For text see page 58)		
			7,500	15,000	15,000							Fellowships		
												<u>UNITED STATES-10, Consultants in Specialized Fields of Public Health</u> (For text see page 58)		
												Short-term Consultants Fees Travel		
			7,500	15,000	15,000							TOTAL - UNITED STATES		
1	1	1		9,292	9,550							<u>FIELD OFFICE - EL PASO</u> (For text see page 58)		
	1	1		5,475	7,469							Chief, Field Office, .334		
		1			4,500							Sanitary Engineer, .7060		
1	1	1		4,950	5,150							Public Health Nurse, .7091		
2	2	2		7,206	7,406							Administrative Officer, .7059		
												Clerk Stenographer, .326, .327		
				26,923	34,075							Cost of Salaries		
				2,100	2,100							Short-term Consultants		
				1,800	1,800							Fees		
												Travel		
				20,764	19,488							Allowances and Statutory Travel		
				6,755	7,045							Duty Travel		
												<u>Common Services</u>		
				50	50							Space and Equipment		
				2,430	2,430							Other Services		
				1,000	1,000							Supplies and Materials		
				500	350							Fixed Charges and Claims		
				4,300	500							Acquisition of Capital Assets		
				4,000	4,000							Conference Services		
				100	100							Hospitality		
4	5	6	48,579	70,722	72,938							TOTAL - WASHINGTON OFFICE - COUNTRY PROGRAMS		
4	5	6	56,079	85,722	87,938									

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-1, Environmental Sanitation Training</u> (For text see page 58)		
												All Purposes		
												<u>AMRO-10, Inter-American Program of Education in Biostatistics</u> (For text see page 58)		
												Fellowships		
												Grants		
												<u>AMRO-16, Assistance to Schools of Public Health</u> (For text see page 58)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
												<u>AMRO-17.5, Waterworks Training Course</u> (For text see page 59)		
												All Purposes		
												<u>AMRO-18, Medical Education</u> (For text see page 59)		
												Short-term Consultants		
												Fees		
												Travel		
												Supplies and Equipment		
												Fellowships		
												<u>AMRO-23.5, Fifth Regional Nursing Congress</u> (For text see page 59)		
												All Purposes		
												<u>AMRO-26, Brucellosis Control</u> (For text see page 59)		
												All Purposes		
												<u>AMRO-28, Advanced Nursing Education</u> (For text see page 59)		
												Fellowships		
		1			5,475							<u>AMRO-29, Cultural Anthropology</u> (For text see page 59)		
												Cultural Anthropologist, .7092		
					2,100							Short-term Consultants		
					1,800							Fees		
					5,690							Travel		
					5,115							Allowances and Statutory Travel		
		1			20,180							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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1			54,146									1			54,146		
										14,955	19,255						
										15,000	15,000						
									41,263	29,955	34,255				41,263	29,955	34,255
				1,200													
				1,400													
				4,300													
			8,600	6,900											8,600	6,900	
			8,700												8,700		
				3,600	3,600												
				4,200	4,200												
				2,000	2,000												
				12,900	12,900												
			24,800	22,700	22,700										24,800	22,700	22,700
			8,700												8,700		
			2,800												2,800		
			11,100	27,990	27,990										11,100	27,990	27,990
														1			20,180

220

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-35, Fellowships (Unspecified)</u> (For text see page 60)		
			48,978	41,652	64,520							Fellowships		
												<u>AMRO-39, Environmental Sanitation</u> (Advisory Committee and Consultants) (For text see page 60)		
				2,100 1,800 4,333	2,100 1,800 4,333 500							Short-term Consultants Fees Travel		
												Duty Travel		
			6,248	8,233	8,733							Supplies and Equipment		
												<u>AMRO-45, Laboratory Services</u> (For text see page 60)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Fellowships		
												<u>AMRO-46, Seminar on Nursing Education</u> (For text see page 60)		
												Short-term Consultants Fees Travel		
												Duty Travel		
												Supplies and Equipment		
												Participants		
												<u>AMRO-48, Seminar on Teaching of Public Health in Schools of Veterinary Medicine</u> (For text see page 60)		
												All Purposes		
				1,400 1,200 5,000	1,400 1,200 5,000							<u>AMRO-57, Yellow Fever Studies</u> (For text see page 60)		
												Short-term Consultants Fees Travel		
			100	7,600	7,600							Grants		
												<u>AMRO-60, Smallpox Eradication</u> (For text see page 61)		
				2,100 1,800	2,100 1,800 1,300 1,500							Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Contractual Services		

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$			
					3,270							AMRO-60, (continued)		
					12,200							Fellowships		
			5,400	5,400	22,170							Participants		
												AMRO-61, Rabies Control (For text see page 61)		
												Short-term Consultants		
												Fees		
												Travel		
												Supplies and Equipment		
												AMRO-63, Assistance to Schools of Nursing (For text see page 61)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
												AMRO-67, Teaching of Public Health in Schools of Veterinary Medicine (For text see page 61)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
1	1	1		8,396	8,646							AMRO-72, Dental Health (For text see page 62)		
				4,923	4,066							Dental Officer, .7053		
				4,800	6,150							Allowances and Statutory Travel		
				13,723	14,000							Duty Travel		
												Fellowships		
1	1	1	36,839	31,842	32,862									
												AMRO-74, Plague Investigation (For text see page 62)		
					700							Short-term Consultants		
					600							Fees		
												Travel		
					1,470							Duty Travel		
					1,700							Supplies and Equipment		
					6,770							Participants		
					11,240									
												AMRO-76, Vaccine Testing (For text see page 62)		
												Grants		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															5,400	5,400	22,170
				1,200 1,400 500	1,200 1,400 500												
			18,249	3,100	3,100										18,249	3,100	3,100
					1,800 2,100 2,940												
					6,840												6,840
				1,200 1,400 4,300	1,200 1,400 4,300												
			6,267	6,900	6,900										6,267	6,900	6,900
												1	1	1	36,839	31,842	32,862
																	11,240
			4,738	5,248	5,248										4,738	5,248	5,248

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$			
												<u>AMRO-77, Pan American Foot-and-Mouth Disease Center</u> (For text see page 62)		
						1	1	1		10,400		Director, .923	P5	
						1	1	1		9,125		Chief of Field Service, .924	P4	
						1	1	1		9,354		Chief of Laboratory Services, .925	P4	
						1	1	1		7,887		Virologist, .926	P4	
						1	2	2		14,881		Senior Field Officer, .7003, .7004	P4	
							1	1		7,300		Country Consultant, .7074	P4	
							1	1		6,000		Technical Officer, .7075	P3	
						1	1	1		7,525		Serologist, .927	P3	
						2	2	2		13,175		Virologist, .928, .1020	P3	
						1	1	1		6,376		Administrative Officer, .929	P3	
						1	1	1		5,317		Assistant Serologist, .930	P2	
						1	1	1		4,790		Accounting Assistant, .173	WL8	
						1	1	1		3,992		Senior Veterinarian, .987	RL8	
						1	1	1		3,498		Junior Veterinarian, .988	RL7	
						1	1	1		3,176		Accountant, .7006	RL7	
						1	1	1		2,904		Research Assistant, .989	RL6	
												Assistant Administrative Officer, .931	RL6	
						1	1	1		3,049		Librarian-Editor, .7005	RL6	
						1	1	1		2,669		Accounting Clerk, .7076	RL6	
							1	1		2,669		Senior Accounting Clerk, .7048	RL5	
						1	1	1		2,372		Bilingual Secretary, .990, .1007, .1109, .7007	RL5	
						4	4	4		10,056		Senior Laboratory Technician, .971	RL5	
						1	1	1		2,452		General Maintenance Officer, .935	RL5	
						1	1	1		2,412		Property and Supply Clerk, .933	RL4	
						1	1	1		2,090		Clerk Typist, .934, .7009, .7077	RL4	
						2	3	3		5,719		Senior Clerk, .1168	RL4	
						1	1	1		2,008		Laboratory Technician, .932, .1011	RL4	
						2	2	2		3,575		Laboratory Assistant, .938, .939, .943, .1010, .7012, .7079	RL3	
						5	6	6		6,957		Electrician, .7010	RL3	
						1	1	1		1,248		Plumber-Fitter, .7011	RL3	
						1	1	1		1,248		Laboratory Aide, .7018	RL3	
						1	1	1		831		Assistant Maintenance Officer, .942	RL3	
						1	1	1		1,194		Senior Carpenter, .7080	RL3	
							1	1		1,194		Storekeeper, .940	RL2	
						1	1	1		941		Chauffeur, .936, .937, .969, .7081	RL2	
						3	4	4		4,008		Laundry Operator-Seamstress, .941	RL2	
						1	1	1		947		Janitor-Office Boy, .944	RL2	
						1	1	1		911		Laboratory Aide, .986, .1029, .1172, .1173, .1174, .7016, .7017	RL2	
						7	7	7		6,144		Guard (Watchman), .1024, .1030, .1045, .7013, .7014, .7015	RL2	
						6	6	6		5,213		Carpenter, .1025	RL2	
						1	1	1		910		Field Aide, .7019, .7020	RL2	
						2	2	2		1,751		Mason-Painter, .1037	RL2	
						1	1	1		905		Laborer, Cattle Attendant (Sr), .7023	RL2	
						1	1	1		654		Messenger, .7078	RL2	
							1	1		795		Laborer, Cattle Attendant (Jr) .7021, .7022, .7024, .7025, .7026, .7027	RL1	
						6	6	6		4,244		Auxiliary Guard (Watchman), .1155	RL1	
						1	1	1		718		Laundry Assistant, .7082	RL1	
							1	1		622		Laborer, .945, .1026, .1027, .1028, .1031, .1032, .1033, .1034, .1035, .1036, .1038, .1039, .1040, .1041, .1042, .1043, .1044, .1156, .1157, .7028, .7029, .7030, .7031, .7083, .7084, .7085, .7086, .7087	RL1	
						23	28	28		20,414		Temporary Staff and Overtime		
										3,500				
										220,120	232,425	Cost of Salaries		
										67,881	79,190	Allowances and Statutory Travel		
										28,937	43,686	Duty Travel		
										65,985	70,782	Supplies and Equipment		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	AMRO-77, (continued)		
										3,000	3,316	Common Services		
										15,100	15,797	Contractual Services		
										17,472	35,981	Fellowships		
										40,074	40,000	Contingencies		
						93	108	108	*402,098	*458,569	*521,777			
1	1	1		10,700	11,000							<u>AMRO-81, Pan American Zoonoses Center</u> (For text see page 62)		
							1	1		*7,300	*7,525	Director, .1132		
												Chief of Laboratory, 4.1139		
												Technical Education Officer, .7088		
												Zoonoses Specialist, 4.1140		
												Administrative Officer, 4.1164		
						2	2	2		3,080	3,228	2/Field Assistant, .1133, .7037		
						1	1	1		1,267	1,325	Accounting Assistant, .1152		
						1	1	1		1,544	1,618	Laboratory Technician, .7035		
						1	1	1		1,235	1,294	Librarian, .1153		
						2	2	2		2,028	2,122	Laboratory Technician, .1175, .1176		
						1	1	1		1,054	1,102	Secretary, .7036		
						2	2	2		2,148	2,246	Laboratory Technician, .1177, .1178		
						2	2	2		1,768	1,852	Clerk Stenographer, .1134, .7090		
						1	1	1		1,006	1,054	Foreman, .7061		
						1	1	1		1,006	1,054	Clerk, .7062		
						1	1	1		788	824	Clerk Typist, .7039		
						2	2	2		1,539	1,610	Laborer, .7041, .7042		
												Laboratory Aide, .1179, .1180, .7063		
						3	3	3		1,923	2,014	Chauffeur, .1135		
						1	1	1		672	702	Librarian Assistant, .7038		
						1	1	1		647	677	Animal Caretaker, .7089		
						1	1	1		627	657	Laborer (Laboratory), .1136		
						1	1	1		440	462	Laborer (Garden), .1137		
						1	1	1		490	512	Laborer (Janitor), .7045		
						1	1	1		473	494	Laborer, .7046, .7064		
						2	2	2		914	956	Messenger, .7043		
						1	1	1		449	471			
				10,700	11,000					32,398	33,799	Cost of Salaries		
				8,180	12,964					*5,437	*3,175	Allowances and Statutory Travel		
										1/ 2,449	1/ 2,569			
				3,390	2,550					*1,000	*1,000	Duty Travel		
										1/ 280	1/ 280			
				5,200	4,500					*1,000	*1,000	Supplies and Equipment		
										1/10,000	1/10,000			
				3,000	5,500					1/14,131	1/12,835	Common Services		
										*20,607		Zoonoses Training Course		
										1/17,492	1/18,315	Contingencies		
1	1	1	33,591	30,470	36,514	29	30	30	**92,424	104,794	82,973			
												<u>AMRO-85, Latin American Center for</u> <u>Classification of Diseases</u> (For text see page 63)		
												Fellowships		
												Grants		

* Organization of American States - Technical Assistance.

** Made up of contributions from the Government of Argentina, OAS/TA, Cyanamid International, E. R. Squibb & Sons.

1/ Contribution from the Government of Argentina.
2/ All local posts financed by contribution from the Government of Argentina.

[illegible]

220

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-88, Aedes aegypti Eradication</u> (For text see page 63)		P5
1	1	1		10,075	10,375							Medical Officer, .1152		
				8,400	2,100							Short-term Consultants Fees		
				7,200	1,800							Travel		
				4,120	5,950							Allowances and Statutory Travel		
				5,760	5,760							Duty Travel		
				10,000	21,700							Supplies and Equipment		
1	1	1	23,991	45,555	47,685									
1						2	2	2		15,068	15,524	<u>AMRO-90, Malaria Technical Advisory Services (Regional)</u> (For text see page 63)		P4 P4 P4 P4 P4 P2 ML6
						2	2	2		14,938	15,388	Medical Officer, 9111, 9159		
							1	1		8,417	8,667	Sanitary Engineer, 9135, 9160		
							1	1		8,125	8,375	Entomologist, .1071, 9261		
						1	1	1		7,694	7,938	Parasitologist, .1130, 9262		
						4	4	4		20,016	20,816	Administrative Officer, 9027		
						1	1	1		2,400	2,425	Sanitarian, 9161, 9162, 9163, 9164		
												Clerk Stenographer, 9122		
										76,658	79,133	Cost of Salaries		
										43,755	44,169	Allowances and Statutory Travel		
										31,525	31,525	Duty Travel		
										5,700	5,700	Supplies and Equipment		
										1,120	1,120	Common Services		
2			30,947			10	12	12	134,287	158,758	161,647			
1	1	1		7,812	8,062							<u>AMRO-92, Poliomyelitis</u> (For text see page 64)		P4
				1,400	1,400							Medical Officer, .7047		
				1,200	1,200							Short-term Consultants Fees		
				4,248	8,126							Travel		
				1,500	1,500							Allowances and Statutory Travel		
				1,000	1,000							Duty Travel		
				8,600	8,600							Supplies and Equipment		
												Fellowships		
1	1	1	39,338	25,760	29,888									
1												<u>AMRO-94, Diarrheal Diseases in Childhood</u> (For text see page 64)		P3 P3 P2
												Bacteriologist, .1144		
												Statistician, .1145		
												Public Health Nurse, .1146		
				8,400	15,400							Short-term Consultants Fees		
				7,200	13,200							Travel		
					2,173							Supplies and Equipment		
3			41,223	15,600	30,773									

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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	23,991	45,555	47,685
												12	12	12	165,234	158,758	161,647
												1	1	1	39,338	25,760	29,888
												3			41,223	15,600	30,773

230

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-98, Working Group on Medical Certification</u> (For text see page 65)		
			1,490									All Purposes		
												<u>AMRO-100, Courses on Nursing Supervision and Administration</u> (For text see page 65)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												<u>AMRO-102, Pediatric Education</u> (For text see page 65)		
												Short-term Consultants Fees Travel		
												Supplies and Equipment		
												Contractual Services		
												Fellowships		
												<u>AMRO-106, Seminar on Public Health Administration</u> (For text see page 65)		
					1,400							Short-term Consultants Fees Travel		
					1,200									
					1,000							Supplies and Equipment		
					500							Conference Services		
					14,400							Participants		
					18,500									
												<u>AMRO-110, Tuberculosis Prevention</u> (For text see page 65)		
												Medical Officer, 4.7505 Statistician, 4.7506 Public Health Nurse, 4.7504 X-Ray Technician, 4.7507 Laboratory Technician, 4.7508		
												Cost of Salaries		
												Short-term Consultants Fees Travel		
												Allowances and Statutory Travel		
												Duty Travel		
												Supplies and Equipment		
												Participants		

P4
P3
P2
P2
P2

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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															1,490		
				2,400 2,800 1,000	2,400 2,800 1,000												
			20,124	6,200	6,200										20,124	6,200	6,200
					1,200 1,400 500 250 7,200												
					10,550												10,550
																	18,500
1 1 1 1 1	1 1 1 1 1			7,300 6,000 4,800 4,800 4,800	7,525 6,200 5,000 5,000 5,000												
				27,700	28,725												
					1,800 2,100												
				15,785	13,888												
				12,000	10,000												
				232	1,000												
					10,070												
5	5			55,717	67,583								5	5		55,717	67,583

PAN AMERICAN HEALTH ORGANIZATION												PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
REGULAR BUDGET						OTHER FUNDS								
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE					
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	AMRO-112, Fundamental Education Training Center (CREPAL) (For text see page 66) Sanitarian, .7002 Short-term Consultants Fees Travel Allowances and Statutory Travel 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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	3,120	7,945	12,115
															15,000	15,000	
															20,000	35,000	
															25,000		
																41,925	
															200,000	583,000	583,000
															54,200	41,200	28,800

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-138, Studies on Malaria Chemotherapy</u> (For text see page 67)		
									55,000			Grants		
												<u>AMRO-142, Health Aspects of Nuclear Energy</u> (For text see page 67)		
				4,200	4,200							Short-term Consultants		
				3,600	3,600							Fees		
				12,900	12,900							Travel		
			8,000	20,700	20,700							Fellowships		
												<u>AMRO-149, Leprosy Control</u> (For text see page 67)		
												Short-term Consultants		
												Fees		
												Travel		
												Fellowships		
	1	1		8,875	9,125							<u>AMRO-150, Food and Drug Services</u> (For text see page 68)		
	1	1		7,412	7,637							Food and Drug Consultant, .7069		
				16,287	16,762							Food and Drug Consultant, .7070		
				6,443	8,713							Cost of Salaries		
				7,000	12,000							Allowances and Statutory Travel		
				1,500								Duty Travel		
				3,000	5,000							Supplies and Equipment		
				8,020	8,600							Contractual Services		
												Fellowships		
	2	2	32,520	42,250	51,075									
												<u>AMRO-152, Conference of Directors of Schools of Public Health</u> (For text see page 68)		
					2,100							Short-term Consultants		
					1,800							Fees		
					750							Travel		
					250							Supplies and Equipment		
					9,000							Conference Services		
			11,385		13,900							Participants		
												<u>AMRO-155, Schistosomiasis Control</u> (For text see page 68)		
				2,100	2,100							Short-term Consultants		
				1,800	1,800							Fees		
				3,900	3,900							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			INTER-ZONE	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$		
	1	1		3,000	5,475 6,150							AMRO-156, Latin American Training Program in Hospital Statistics (For text see page 68)	
												Hospital Statistics Consultant, .7000 Medical Records Librarian, .7001	
				3,000	11,625							Cost of Salaries	
				3,750	7,368							Allowances and Statutory Travel	
				1,000	4,000							Duty Travel	
				2,500	1,000							Supplies and Equipment	
					8,600							Fellowships	
	1	2		10,250	32,593								
	1	1			5,475 7,469							AMRO-158, Mental Health (For text see page 68)	
					6,697 3,891							Medical Officer, .7071	
					2,500 5,000							Allowances and Statutory Travel	
					850 1,700							Duty Travel	
	1	1		15,522	18,060							Contractual Services	
												AMRO-160, Treponematoses Eradication (For text see page 69)	
					2,800 2,400							Short-term Consultants Fees Travel	
			7,800	5,200	5,200								
1	2	2		11,600 16,235	11,600 16,398							AMRO-165, Nutrition Advisory Service (Interzone) (For text see page 69)	
1	1	1		7,412 3,565	7,637 3,565							Regional Nutrition Adviser, .7056 Nutrition Adviser, .7046, .7073 Nutrition Educator, .7055 Technical Assistant, .7057	
				38,812	39,200							Cost of Salaries	
				2,100 4,800	4,200 3,600							Short-term Consultants Fees Travel	
				19,528	23,324							Allowances and Statutory Travel	
				13,740	13,490							Duty Travel	
2	5	5	26,932	78,980	83,814								
												AMRO-181, Live Poliovirus Vaccine Studies (For text see page 69)	
						1	1	1	7,544 6,317 5,067	7,771 6,531 5,267		Medical Officer, .7068 Virologist, .7051 Laboratory Adviser, .7066	
									18,928	19,569		Cost of Salaries	
									13,350	8,635		Allowances and Statutory Travel	
									47,636	47,636		All Purposes	
						3	3	3	1/ 49,322	1/ 79,914	1/ 75,840		

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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													1	2		10,250	32,593
													1	1		15,522	18,060
															7,800	5,200	5,200
												2	5	5	26,932	78,980	83,814
												3	3	3	49,322	79,914	75,840

238

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			INTER-ZONE		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961			
			\$	\$	\$				\$	\$	\$	<u>AMRO-182, Training Course in Dietary and Nutritional Surveys</u> (For text see page 69)		
									1/ 25,436	1/ 29,011		All Purposes		
		1			5,475							<u>AMRO-183, Nursing Midwifery</u> (For text see page 69)		
					4,545							Public Health Nurse Midwife, .7094		
					3,000							Allowances and Statutory Travel		
												Duty Travel		
		1			13,020									
1	1	1		5,475	7,469							<u>AMRO-185, Hospital Planning and Organization</u> (For text see page 70)		
		1			2,730							Hospital Administrator, .7058		
				5,475	10,199							Secretary, .7096		
				4,620	3,204							Cost of Salaries		
				4,930	4,930							Allowances and Statutory Travel		
					8,600							Duty Travel		
1	1	2	4,125	15,025	26,933							Fellowships		
												<u>AMRO-187, Promotion of Urban Water Supplies</u> (For text see page 70)		
				5,600	14,000							Short-term Consultants		
				4,800	12,000							Fees		
			9,100	10,400	26,000							Travel		
												<u>AMRO-196, Insecticide Testing Team</u> (For text see page 70)		
						1	3	3	22,031	22,706		Entomologist, 9238, 9249, 9250		
						1						Entomologist, 9239		
						1	3	3	18,117	18,717		Chemist, 9240, 9251, 9252		
						4	6	6	29,334	30,534		Technical Assistant, 9241, 9242, 9243, 9244, 9253, 9254		
									69,482	71,957		Cost of Salaries		
									2,800	2,800		Short-term Consultants		
									2,400	2,400		Fees		
												Travel		
									55,007	48,097		Allowances and Statutory Travel		
									21,000	21,000		Duty Travel		
									4,000	4,000		Supplies and Equipment		
									2,500	2,500		Contractual Services		
						7	12	12	83,145	157,189	152,754			
												<u>AMRO-197, Research on Resistance of Anophelines to Insecticides</u> (For text see page 70)		
									10,000	20,000	20,000	Grants		

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		
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															25,436	29,011	
														1			13,020
												1	1	2	4,125	15,025	26,933
															9,100	10,400	26,000
												7	12	12	83,145	157,189	152,754
															10,000	20,000	20,000

PAN AMERICAN HEALTH ORGANIZATION											PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
REGULAR BUDGET						OTHER FUNDS							
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE				
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961		
			\$	\$	\$				\$	\$	\$	AMRO-198, Administrative Methods and Practices in Public Health (For text see page 70) Chief Administrative Methods Officer, .7072 Allowances and Statutory Travel Duty Travel Fellowships 	

1/ Grant from Sister Elizabeth Kenny 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

59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	59	60	61	1959	1960	1961
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													1	1	5,200	17,228	22,921
															16,000	18,000	20,000
															25,000		
																	20,350
																	10,940
																	15,980
1	5	5	236,498	200,255	217,561	3	3	3	73,129	63,652	69,271	159	189	193	1,892,866	2,445,779	2,641,789

PAN AMERICAN HEALTH ORGANIZATION												PART III	
REGULAR BUDGET						OTHER FUNDS						FIELD AND OTHER PROGRAMS	
NUMBER OF POSTS			ESTIMATED EXPENDITURE			NUMBER OF POSTS			ESTIMATED EXPENDITURE			SECTION 3	
59	60	61	1959	1960	1961	59	60	61	1959	1960	1961	PUBLICATIONS	
			\$	\$	\$				\$	\$	\$	(For text see page 72)	
			45,000	45,000	55,000							Ch. 1. PASB Bulletin	
			5,000	5,000	5,500							Ch. 2. Statistical Publications and Reports	
			20,000	40,000	40,000							Ch. 3. Special Publications	
									25,000	10,000	10,000	Ch. 4. Special Malaria Publications	
			70,000	90,000	100,500				25,000	10,000	10,000	TOTAL	
												PART III	
												FIELD AND OTHER PROGRAMS	
												SECTION 4	
												REPATRIATION GRANT	
												(For text see page 72)	
			4,500	4,500	4,500							<u>Repatriation Grant</u>	
												PART IV	
												AMOUNT FOR INCREASING THE	
												WORKING CAPITAL FUND	
												(For text see page 72)	
					300,000							<u>Amount for Increasing the Working Capital Fund</u>	

[illegible]

ANNEX I

OTHER EXTRA - BUDGETARY FUNDS

INTERNATIONAL HEALTH ACTIVITIES FOR WHICH THE FUNDS PROPOSED
ARE NOT ADMINISTERED BY PAHO/WHO

This Annex is presented in conformity with Resolution V made at the 31st Meeting of the Executive Committee, which approved a form of presenting the estimates in a manner designed to segregate from the main body of the budget schedules all funds falling outside the direct administrative control of the 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>1959</u>	<u>1960</u>	<u>1961</u>
	<u>\$</u>	<u>\$</u>	<u>\$</u>
<u>ARGENTINA</u>	<u>270,000</u>	<u>123,500</u>	<u>157,000</u>
Argentina-7, Public Health Services	20,000*	-	100,000
Argentina-8, Malaria Eradication	230,000*	56,000	57,000
Argentina-20, Tuberculosis Control	20,000*	17,500*	-
Argentina-28, Leprosy Control	-	50,000	-
<u>BOLIVIA</u>	<u>143,000</u>	<u>172,000</u>	<u>60,000</u>
Bolivia-4, Malaria Eradication	143,000*	137,000	60,000
Bolivia-7, BCG Vaccination	-	35,000	-
<u>BRAZIL</u>	<u>119,000</u>	<u>112,000</u>	<u>50,000</u>
Brazil-3, Public Health Services (North East)	99,000*	82,000*	50,000
Brazil-21, Trachoma Control	-	30,000	-
Brazil-39, Public Health Services (Mato Grosso)	20,000*	-	-
<u>BRITISH GUIANA AND WEST INDIES</u>	<u>228,000</u>	<u>282,000</u>	<u>158,000</u>
British Guiana-5, Malaria Eradication	-	10,000	5,000
British Guiana-10, Public Health Services	-	30,000	-
Jamaica-2, Malaria Eradication	130,000*	178,000	100,000
Trinidad-3, Malaria Eradication	80,000*	(28,000*	50,000
Windward Islands-2, Malaria Eradication	18,000	(31,000	3,000
Dominica	5,500*	5,000*	3,000
Grenada	9,500*	-	-
Santa Lucia	3,000*	-	-
<u>BRITISH HONDURAS</u>	<u>42,000</u>	<u>35,000</u>	<u>10,000</u>
British Honduras-1, Malaria Eradication	(13,000*	15,000	-
British Honduras-5, Public Health Services	(20,000	20,000*	10,000
	9,000*		
<u>CHILE</u>	<u>72,300</u>	<u>47,000</u>	<u>65,000</u>
Chile-16, Rural Health Services (Linares)	15,000*	-	-
Chile-27, Public Health Services (Ovalle-Copiapó)	22,000*	-	-
Chile-34, Training of Nursing Auxiliaries	35,300*	47,000*	15,000*
Chile-38, Rural Health Services	-	-	50,000

*Allocated by UNICEF Executive Board.

<u>Country</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
	<u>\$</u>	<u>\$</u>	<u>\$</u>
<u>COLOMBIA</u>	<u>785,000</u>	<u>791,000</u>	<u>500,000</u>
Colombia-4, Public Health Services	30,000*	(20,000*	-
Colombia-5, Malaria Eradication	755,000*	(50,000	-
Colombia-19, Leprosy Control	-	686,000	500,000
		35,000	-
<u>COSTA RICA</u>	<u>42,000</u>	<u>53,000</u>	<u>30,000</u>
Costa Rica-2, Malaria Eradication	42,000*	23,000	-
Costa Rica-14, Expansion of Public Health Services	-	30,000	30,000
<u>DOMINICAN REPUBLIC</u>	<u>118,000</u>	<u>105,000</u>	<u>88,000</u>
Dominican Republic-2, Malaria Eradication	103,000*	100,000	48,000
Dominican Republic-4, Public Health Services	-	-	40,000
Dominican Republic-10, BCG Vaccination	15,000*	5,000*	-
<u>ECUADOR</u>	<u>148,000</u>	<u>150,000</u>	-
Ecuador-14, Malaria Eradication	148,000*	150,000	-
<u>EL SALVADOR</u>	<u>230,000</u>	<u>30,000</u>	<u>50,000</u>
El Salvador-2, Malaria Eradication	230,000*	-	-
El Salvador-5, Health Demonstration Area	-	30,000	50,000
<u>GUATEMALA</u>	<u>200,000</u>	<u>290,000</u>	<u>50,000</u>
Guatemala-1, Malaria Eradication	200,000*	200,000	-
Guatemala-8, Public Health Services	-	40,000	50,000
Guatemala-11, Tuberculosis Control	-	50,000	-
<u>HAITI</u>	<u>185,000</u>	<u>206,800</u>	<u>250,000</u>
Haiti-4, Malaria Eradication	170,000*	189,000	220,000
Haiti-16, Public Health Services	-	-	30,000
Haiti-20, Nutrition	15,000*	17,800*	-
<u>HONDURAS</u>	<u>204,000</u>	<u>170,000</u>	<u>200,000</u>
Honduras-1, Malaria Eradication	(50,000		
Honduras-4, Public Health Services	(130,000*	120,000	120,000
Honduras-5, BCG Vaccination and Tuberculosis Control	20,000	50,000	50,000
	4,000*	-	30,000
<u>MEXICO</u>	<u>2,175,000</u>	<u>635,000</u>	<u>120,000</u>
Mexico-15, State Health Services	48,000*	50,000	100,000
Mexico-23, Nutrition	27,000*	30,000	20,000
Mexico-53, Malaria Eradication	(1,700,000*	555,000	-
	(400,000		
<u>NICARAGUA</u>	<u>247,000</u>	<u>105,000</u>	<u>100,000</u>
Nicaragua-1, Malaria Eradication	247,000*	105,000	100,000

* Allocated by UNICEF Executive Board.

<u>Country</u>	<u>1959</u>	<u>1960</u>	<u>1961</u>
	\$	\$	\$
<u>PANAMA</u>	<u>146,000</u>	<u>120,000</u>	<u>30,000</u>
Panama-1, Public Health Services	-	50,000	30,000
Panama-2, Malaria Eradication	146,000*	70,000	-
<u>PARAGUAY</u>	<u>132,000</u>	<u>203,000</u>	<u>100,000</u>
Paraguay-1, Malaria Eradication	86,000*	85,000	-
Paraguay-10, Public Health Services	46,000*	38,000*	50,000
Paraguay-18, Nutrition	-	80,000	50,000
<u>PERU</u>	<u>350,000</u>	<u>385,000</u>	<u>320,000</u>
Peru-5, Malaria Eradication	350,000*	350,000	220,000
Peru-22, Public Health Services	-	-	100,000
Peru-29, Tuberculosis Control	-	35,000	-
<u>SURINAM & NETHERLANDS ANTILLES</u>	<u>30,000</u>	<u>25,000</u>	<u>15,000</u>
Surinam-1, Malaria Eradication	30,000*	25,000	15,000
<u>URUGUAY</u>	<u>20,000</u>	-	-
Uruguay-1, BCG Laboratory	20,000*	-	-
<u>INTER-COUNTRY PROJECTS</u>	<u>67,000</u>	-	-
AMRO-95, Environmental Sanitation (Caribbean)			
Santa Lucia	10,000*	-	-
St. Vincent	10,000*	-	-
Trinidad	47,000*	-	-
<u>TOTAL</u>	<u>5,953,300</u>	<u>4,040,300</u>	<u>2,353,000</u>

*Allocated by UNICEF Executive Board.

ANNEX 2

WORLD HEALTH ORGANIZATION TECHNICAL ASSISTANCE CATEGORY II PROGRAMS
(Figures in parentheses denote number of personnel or fellowships provided)

Under the Technical Assistance program system, projects may be proposed under Category II for purposes of substitution, to be implemented if savings become available in Category I. As this portion of the program is not related to actual or potential additional funds, it is appropriate to present it in this separate annex. The projects will be found in the following table.

Category II projects may consist of supplemental portions of projects which appear in Part III, or they may represent separate projects. For the former, indicated by an asterisk, project descriptions appear in the narrative section of Part III unless further explanation is necessary below.

For the latter, project descriptions are given below.

BRAZILBRAZIL-16, WHO/TA Public Health Administration Fellowships

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

BRITISH GUIANA AND WEST INDIESBRITISH GUIANA AND WEST INDIES-9, WHO/TA Public Health Administration Fellowships

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

DOMINICAN REPUBLICDOMINICAN REPUBLIC-7, WHO/TA Public Health Administration Fellowships

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

ECUADORECUADOR-17, WHO/TA Public Health Administration Fellowships

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

EL SALVADOREL SALVADOR-13, WHO/TA Public Health Administration Fellowships

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

FRENCH ANTILLES AND GUIANAFRENCH ANTILLES AND GUIANA-1, WHO/TA Public Health Administration Fellowships

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

GUATEMALAGUATEMALA-7, WHO/TA Public Health Administration Fellowships

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

HAITIHAITI-14, Aedes aegypti Eradication

In November 1958 this program was suspended indefinitely on the request of the Government, owing to financial difficulties, but it is anticipated that it will be resumed by 1960 and continued until the objective of eradication has been attained.

Provision is made for the services of a medical officer and a sanitarian in 1960 and 1961.

MEXICOMEXICO-23, National Institute of Nutrition

The purpose of this project is to collaborate in the reorganization of the Institute of Nutrition so as to enable it better to take advantage of technical developments (particularly in basic food analysis and clinical and biochemical investigations) and to coordinate its activities with those of the public health services.

In 1957, the Organization provided the services of a nutrition consultant, who did a study and made general recommendations. In 1958, the nutrition consultant returned to aid in preparing a quadripartite plan of operations, involving UNICEF and FAO who are also cooperating in the provision of equipment, supplies and technical staff.

Provision is made for fellowships for the training of technical staff of the Institute.

MEXICO-24, WHO/TA Public Health Administration Fellowships

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

SURINAM AND NETHERLANDS ANTILLESSURINAM AND NETHERLANDS ANTILLES-3, WHO/TA Public Health Administration Fellowships

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

VENEZUELAVENEZUELA-4, WHO/TA Public Health Administration Fellowships

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

1 9 6 0

1 9 6 1

ARGENTINA

* Argentina-3, Nursing Education
(Cordoba, El Chaco)

* Argentina-7, Public Health
Services

BOLIVIA

* Bolivia-13, Public Health
Administration Fellowships

BRAZIL

* Brazil-8, National Virus
Laboratory Services

Brazil-16, Public Health
Administration Fellowships

BRITISH GUIANA AND WEST INDIES

* British Guiana and West Indies-1,
Aedes aegypti Eradication

British Guiana and West Indies-9,
Public Health Administration
Fellowships

CHILE

* Chile-18, Public Health
Administration Fellowships

COLOMBIA

* Colombia-4, Public Health Services

CUBA

* Cuba-3, Public Health Services

Total	Personnel	Supplies	Fellowships	Total	Personnel	Supplies	Fellowships
\$	\$	\$	\$	\$	\$	\$	\$
17,200	-	-	(4) 17,200	17,200	-	-	(4) 17,200
16,800	(1) 3,900	-	(3) 12,900	17,200	-	-	(4) 17,200
34,000	3,900	-	30,100	34,400	-	-	34,400
12,900	-	-	(3) 12,900	12,900	-	-	(3) 12,900
4,300	-	-	(1) 4,300	4,300	-	-	(1) 4,300
4,300	-	-	(1) 4,300	4,300	-	-	(1) 4,300
8,600	-	-	8,600	8,600	-	-	8,600
5,500	-	5,500	-	5,500	-	5,500	-
25,800	-	-	(6) 25,800	25,800	-	-	(6) 25,800
31,300	-	5,500	25,800	31,300	-	5,500	25,800
8,600	-	-	(2) 8,600	8,600	-	-	(2) 8,600
38,700	-	-	(9) 38,700	38,700	-	-	(9) 38,700
12,900	-	-	(3) 12,900	11,219	(1) 11,219	-	-

	1 9 6 0				1 9 6 1			
	Total	Personnel	Supplies	Fellowships	Total	Personnel	Supplies	Fellowships
	\$	\$	\$	\$	\$	\$	\$	\$
<u>DOMINICAN REPUBLIC</u>								
Dominican Republic-7, Public Health Administration Fellowships	4,300	-	-	(1) 4,300	4,300	-	-	(1) 4,300
* Dominican Republic-8, <u>Aedes aegypti</u> Eradication	6,850	-	6,850	-	6,850	-	6,850	-
	11,150	-	6,850	4,300	11,150	-	6,850	4,300
<u>ECUADOR</u>								
Ecuador-17, Public Health Administration Fellowships	17,200	-	-	(3) 17,200	17,200	-	-	(3) 17,200
<u>EL SALVADOR</u>								
* El Salvador-5, Health Demonstration Area	8,600	-	-	(2) 8,600	-	-	-	-
El Salvador-13, Public Health Administration Fellowships	-	-	-	-	8,600	-	-	(2) 8,600
	8,600	-	-	8,600	8,600	-	-	8,600
<u>FRENCH ANTILLES AND GUIANA</u>								
French Antilles and Guiana-1, Public Health Administration Fellowships	3,000	-	-	(1) 3,000	4,300	-	-	(1) 4,300
* French Antilles and Guiana-2, <u>Aedes aegypti</u> Eradication	1,330	-	1,330	-	1,330	-	1,330	-
	4,330	-	1,330	3,000	5,630	-	1,330	4,300
<u>GUATEMALA</u>								
Guatemala-7, Public Health Administration Fellowships	12,900	-	-	(3) 12,900	12,900	-	-	(3) 12,900
<u>HAITI</u>								
Haiti-14, <u>Aedes aegypti</u> Eradication	19,201	(2) 19,201	-	-	-	-	-	-
* Haiti-16, Public Health Services	-	-	-	-	17,200	-	-	(4) 17,200
	19,201	19,201	-	-	17,200	-	-	17,200
<u>HONDURAS</u>								
* Honduras-4, Public Health Services	25,800	-	-	(5) 25,800	8,600	-	-	(2) 8,600
<u>MEXICO</u>								
Mexico-23, National Institute of Nutrition	15,400	-	-	(4) 15,400	-	-	-	-
Mexico-24, Public Health Administration Fellowships	8,600	-	-	(2) 8,600	25,800	-	-	(6) 25,800
	24,000	-	-	24,000	25,800	-	-	(6) 25,800

	1 9 6 0				1 9 6 1			
	Total	Personnel	Supplies	Fellowships	Total	Personnel	Supplies	Fellowships
	\$	\$	\$	\$	\$	\$	\$	\$
<u>PANAMA</u>								
* Panama-1, Public Health Services	21,500	-	-	(5) 21,500	8,600	-	-	(2) 8,600
<u>PARAGUAY</u>								
* Paraguay-10, Public Health Services	27,240	-	1,440	(6) 25,800	27,240	-	1,440	(6) 25,800
<u>PERU</u>								
* Peru-22, Public Health Services	25,800	-	-	(6) 25,800	25,800	-	-	25,800
<u>SURINAM AND NETHERLANDS ANTILLES</u>								
* Surinam and Netherlands Antilles-1, Aedes aegypti Eradication	720	-	720	-	720	-	720	-
Surinam and Netherlands Antilles-3, Public Health Administration Fellowships	4,300	-	-	(1) 4,300	4,300	-	-	(1) 4,300
	5,020	-	720	4,300	5,020	-	720	4,300
<u>URUGUAY</u>								
* Uruguay-5, Public Health Services	17,200	-	-	(4) 17,200	17,200	-	-	17,200
<u>VENEZUELA</u>								
Venezuela-4, Public Health Administration Fellowships	8,600	-	-	(2) 8,600	8,600	-	-	8,600
<u>TOTAL CATEGORY II</u>	375,541	23,101	15,840	336,600	345,259	11,219	15,840	318,200

* This is a portion of a project appearing in Part III.

ANNEX 3

A. PROJECTS DESIRED BY GOVERNMENTS AND NOT INCLUDED WITHIN
PAHO/WHO PROGRAM AND BUDGET ESTIMATES FOR 1961

Individual projects which cannot be financed within the limits of the program and budget for 1961.

GUATEMALAGUATEMALA-55, Public Health in Schools of Veterinary Medicine

The development achieved in veterinary public health programs and the increasing attention given to problems of zoonoses and food control have made evident the need for a larger number of veterinary physicians trained to carry out these activities.

There is a great shortage of veterinarians and a lack of sufficient centers for teaching this profession. There is only one school of veterinary medicine (established in 1958), the School of Veterinary Medicine and Zootechnics of the University of San Carlos in Guatemala. The Organization will collaborate in developing this School by providing short-term consultants and awarding fellowships for the teaching staff. The Zone Veterinary Public Health Adviser will continue to furnish advisory services to the dean and professors of the School on the organization of the curriculum.

Short-term Consultants

Fees	\$ 2,800
Travel	2,400

<u>Fellowships</u>	<u>4,300</u>
--------------------	--------------

	<u>\$ 9,500</u>
--	-----------------

NICARAGUANICARAGUA-8, Tuberculosis Control

The Government is interested in developing mass activities to combat tuberculosis, including BCG vaccination, detection of active cases in both urban and rural areas, and domiciliary or semi-domiciliary treatment of such cases.

The Organization was requested to provide a consultant, to remain in the country for at least two years, to give advisory services in connection with training of personnel, organization of the program, and evaluation of results.

It is expected that equipment and supplies will be obtained from other sources.

Medical Officer	\$ 9,676
-----------------	----------

<u>Duty Travel</u>	<u>1,960</u>
--------------------	--------------

	<u>\$ 11,636</u>
--	------------------

URUGUAYURUGUAY-6, National Zoonoses Program

Diseases common to man and animals have a special significance in Uruguay since the country's economy is

largely dependent on the livestock industry. The Government of Uruguay is aware of the need of formulating a national zoonoses program that will coordinate the efforts of all responsible agencies.

The purpose of the proposed program is to utilize existing services in the country in a coordinated manner to conduct a zoonoses control program, supplementing the needs for personnel, material and other necessary resources.

The Organization would provide for a consultant with experience in the organization of services and in applying field work methods, fellowships for the training of professional and auxiliary technical personnel, and some field equipment and laboratory material.

Veterinary Public Health Consultant	\$ 10,820
-------------------------------------	-----------

<u>Duty Travel</u>	<u>1,460</u>
--------------------	--------------

<u>Supplies and Equipment</u>	<u>4,800</u>
-------------------------------	--------------

<u>Fellowships</u>	<u>9,300</u>
--------------------	--------------

	<u>\$ 26,380</u>
--	------------------

INTERCOUNTRY PROJECTSAMRO-26, Brucellosis Control

Improved diagnosis and increased interest in brucellosis have been stimulated by PAHO/WHO training courses conducted in 1952, 1954 and 1957, and by the follow-up consultant services provided by Zone Veterinary Public Health Advisers and Consultants. The previous courses have dealt with antigen production and standardization, diagnostic tests, prevention and treatment of human brucellosis, and control of animal brucellosis.

Facilities were requested to conduct a field trial and demonstration of the goat brucellosis vaccine now in the development stage as well as for continued consultant services.

Short-term Consultants

Fees	\$ 4,200
Travel	3,600

<u>Supplies and Equipment</u>	<u>3,500</u>
-------------------------------	--------------

	<u>\$ 11,300</u>
--	------------------

AMRO-151, Seminar on Teaching of Sanitary Engineering in Schools of Engineering

With the promotion of intensified and enlarged programs of sanitation in the Americas it is reasonable to expect that more and better-trained sanitary engineers will be required in the future. To promote and improve this

specialized education, a survey of the existing institutions, curricula, and facilities, as well as a survey of resources, needs, education and utilization of sanitary engineers in Latin America was proposed. In a subsequent year, a study group would meet to discuss the education and training of sanitary engineers in the light of the results of the surveys.

Provision for the survey would require consultant services and a limited amount of supplies and equipment.

Short-term Consultants

Fees	\$ 6,300
Travel	5,400
Supplies and Equipment	500
	<u>\$ 12,200</u>

AMRO-184, Seminar on Maternal and Child Health Aspects of Public Health Services

During the past five years the Organization has given continuous assistance in the development of maternal and child health as part of the local health services of the various countries. It has placed particular emphasis on the integration of the maternal and child health services within the general health services at both the national and the local levels.

Considerable experience has been gained by the various countries in many of the problems related to this important aspect of the public health service. It is believed that discussion by workers from various countries facing similar problems would be highly beneficial in further clarifying outstanding problems.

For this purpose, it was proposed to hold seminars to bring together public health administrators responsible for maternal and child health programs, together with a sufficient number of those responsible for broad health planning as well as public health nursing administration. Major aspects for discussion would include: the establishment of maternal and child health administrative units at the national level; the functions of these units and their administrative position in the national health service, including the school health service; the problem of decentralization; the orientation of the various phases of the maternal and child health program.

The first seminar would be organized in Mexico for participants from Colombia, Costa Rica, Cuba, the Dominican Republic, El Salvador, Honduras, Guatemala, Mexico and Venezuela. A second seminar would be held in a later year for other countries.

Short-term Consultants

Fees	\$ 1,400
Travel	1,200
Supplies and Equipment	1,500
Participants	11,970
	<u>\$ 16,070</u>

AMRO-190, Seminar on Vital and Health Statistics

Creation of National Committees on Vital and Health Statistics was adopted by the First World Health Assembly

(1948) and later endorsed by the Executive Committee of the Pan American Sanitary Organization in its Seventh Session, 1948, and by the Second Inter-American Statistical Congress held in Bogotá, Colombia, in January 1950.

The purpose of the Committees is to improve and strengthen statistical services by the coordinated efforts of all national services involved in the production or analysis of vital and health statistics in a country. Sixteen committees have been organized in American countries. The WHO Expert Committee on Health Statistics recommended at its fifth meeting (Geneva, 1956) "that regional or inter-regional conferences should be held periodically...". It was proposed to hold the first of these inter-American meetings to promote coordination of statistical activities in the countries and strengthen these committees. Proposed subjects of discussions for this meeting were: (1) definitions and standards in health statistics; (2) hospital records and statistics; (3) definitions and procedures on fetal, infant and peri-natal mortality; (4) eighth revision of International Classification of Diseases; and (5) methods of developing activities of national committees.

This meeting would be of approximately 25 participants. The statistical office of the United Nations and the Inter-American Statistical Institute are also interested in the development of these committees and would be invited to share sponsorship.

Funds for 25 participants, the printing of a report, and secretarial assistance would be required.

<u>Participants</u>	\$ 11,600
<u>Printing and Secretarial Assistance</u>	1,300
	<u>\$ 12,900</u>

AMRO-214, Seminar on Veterinary Public Health Practice

Since 1952 progress has been achieved in development of veterinary public health activities in the health services of many of the countries in the Region. All of these veterinary public health units are new entities and most of the personnel involved have had little, if any, experience in public health before undertaking their duties. At the same time, none of the health services in the Latin American countries has had experience in the full and proper use of veterinary public health services.

It was proposed to conduct a Seminar on Veterinary Public Health for participants from all of the countries where veterinary public health units are in operation. Main topics are program planning, field of activities, consultative services, liaison with agricultural and other groups, and preparation of personnel.

Short-term Consultants

Fees	\$ 700
Travel	600
Supplies and Equipment	1,000
Conference Services	1,000
Participants	14,165
	<u>\$ 17,465</u>

B. SUMMARY

AMOUNTS REQUESTED FOR FIELD PROJECTS IN WHOLE OR IN PART
IN EXCESS OF AMOUNTS BUDGETED FOR 1961 ^{a/}
BY SUBJECT AND MAJOR EXPENSE

<u>Subject</u>	<u>Personnel Costs</u>	<u>Supplies and Equipment</u>	<u>Fellowships</u>	<u>Other</u>	<u>Total</u>
	\$	\$	\$	\$	\$
Malaria	21,357				21,357 ^{b/}
Tuberculosis	78,920		64,540		143,460
Venereal Diseases and Treponematoses		1,000	19,100		20,100
Endemo-Epidemic Diseases	65,882	100,090		5,000	170,972
Virus Diseases	29,100	13,000	7,500	2,900	52,500
Leprosy	9,100		15,350		24,450
Public Health Administration	378,222	51,150	459,640	11,200	900,212
Dental Health		3,000	12,900		15,900
Vital and Health Statistics	28,600	7,500	111,245	16,300	163,645
Nursing	34,542	10,800	89,520		134,862
Social and Occupational Health	15,693	3,000	17,900		36,593
Health Education of the Public			5,640		5,640
Maternal and Child Health	34,254	2,750	53,650	18,162	108,816
Mental Health	3,900		2,500		6,400
Nutrition	5,200	2,000	27,300		34,500
Environmental Sanitation	54,246	12,150	180,178		246,574
Education and Training	58,808	16,100	177,842		252,750
Other Projects	3,900				3,900
	<u>821,724</u>	<u>222,540</u>	<u>1,244,805</u>	<u>53,562</u>	<u>2,342,631</u>

^{a/} Includes those detailed in A. of Annex 3 above.

^{b/} Excludes Special Malaria Fund requests.

ANNEX 4

SPECIAL MALARIA FUND

STATEMENT OF INCOME AND EXPENDITURE

In accordance with the provisions of paragraph 3, Resolution IV of the 31st Meeting of the Executive Committee, June 1957, the Director has the honor to report on the movement of funds of the Special Malaria Fund as of 30 June 1959.

	1 January 1957 to 31 December 1958 \$	1 January to 30 June 1959 \$
Balance (at beginning of period shown in column)	-	<u>1,519,973</u>
<u>Income:</u>		
<u>Voluntary Contributions:</u>		
Government of the Dominican Republic	200,000	
Government of Haiti	5,000	
Government of the United States of America	3,500,000	3,000,000
Government of Venezuela	299,400	
<u>Other Income:</u>		
Interest Earned	119,283	32,745
Excess of Reserve for Unliquidated Obligations	130,246	
Miscellaneous	<u>4,201</u>	<u>2,728</u>
Total Income (for period shown in column)	<u>4,258,130</u>	<u>3,035,473</u>
Total available for Obligation (during period shown in column)	<u>4,258,130</u>	<u>4,555,446</u>
 <u>Expenditure:</u>		
Personal Services and Allowances	815,414	836,442
Travel and Transportation	410,796	155,255
Supplies, Equipment and Other Services	760,281	400,510
Fellowships	304,474	67,127
Trainees	217,246	49,264
Grants	188,116	-
Participants in Seminars	<u>41,830</u>	<u>-</u>
TOTAL OBLIGATIONS (for period shown in column)	<u>2,738,157</u>	<u>1,508,598</u>
Balance (at end of period shown in column)	<u>1,519,973</u>	<u>3,046,848</u>