

PROGRAM AND BUDGET

1957

PASO



WHO

INDEXED

**PROGRAM AND BUDGET OF THE
PAN AMERICAN SANITARY ORGANIZATION
AND THE
WORLD HEALTH ORGANIZATION FOR THE
REGION OF THE AMERICAS
FOR THE YEAR
1957**

(1 January - 31 December)

**PAN AMERICAN SANITARY BUREAU
Regional Office of the World Health Organization
1501 New Hampshire Avenue, N.W.
Washington 6, D. C., U. S. A.**

ABBREVIATIONS

AMRO	Regional symbol for Inter-Country and Inter-Zone Projects
BCG	Bacillus Calmette-Guerin
CAPEP	Campanha de Aperfeiçoamento de Pessoal de Nível Superior (Campaign for Training of High-Level Personnel)
COMEP	Coordination Office of the Malaria Eradication Program
DDT	Dichlorodiphenyltrichloroethane
FAO	Food and Agriculture Organization
IA-ECOSOC	Inter-American Economic and Social Council
ICA	International Cooperation Administration
ICB	Inter-American Center of Biostatistics
IIAA	Institute of Inter-American Affairs
ILO	International Labour Organization
INCAP	Institute of Nutrition of Central America and Panama
OAS/TA	Organization of American States - Technical Assistance
OEEF	Other Extra Budgetary Funds
PASB	Pan American Sanitary Bureau
PASO	Pan American Sanitary Organization
PAU	Pan American Union
SESP	Special Public Health Service
TAA	Technical Assistance Administration
TARO	The Americas Regional Office
Ung	Ungraded
UNICEF	United Nations Children's Fund
UN/TA	United Nations Technical Assistance
USPHS	United States Public Health Service
WHO	World Health Organization

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LETTER OF TRANSMITTAL AND AUTHORITY

In accordance with the provisions of the Constitution of the Pan American Sanitary Organization, and with the instructions of the Director-General of the World Health Organization, the Director has the honor to present the Proposed Program and Budget of the Pan American Sanitary Organization for 1957, together with the Proposed Program and Budget of the World Health Organization for the Region of the Americas for 1957.

Fred L. Soper
Director

INTRODUCTION

The present document has been prepared in conformance with the terms of Resolution II of the 25th Meeting of the Executive Committee, which approved, *inter alia*, the principle of the preparation of a single document containing the budget estimates of the Pan American Sanitary Organization and of the World Health Organization for the Region of the Americas.

The WHO Regional Program and Budget for 1957 is presented for the consideration of the VIII Meeting of the Directing Council of the Pan American Sanitary Organization, acting as Regional Committee of the World Health Organization. It includes the activities proposed to be financed from the regular funds of WHO, as well as those expected to be carried out with funds made available by the United Nations Technical Assistance Program. The recommendations of the Regional Committee will be transmitted to the Director-General of the World Health Organization for his use in the preparation of the over-all WHO Program and Budget estimates for 1957.

The 1957 Program and Budget of the Pan American Sanitary Organization is presented for information to the 26th Meeting of the Executive Committee and to the VIII Meeting of the Directing Council, in conformance with Resolution II of the 16th Meeting of the Executive Committee. The budget estimates include the programs proposed to be financed from the regular funds of the Pan American Sanitary Organization, as well as the activities planned to be carried out with funds expected to be available from the program of Technical Cooperation of the Organization of American States and from other cooperating agencies. The 1957 PASO Program and Budget will subsequently be presented, together with any comments or modifications as may appear appropriate, for the consideration of the 28th Meeting of the Executive Committee. The recommendations of the Committee and the budget document will be submitted to the IX Meeting of the Directing Council for final review and approval.

It is expected that this document will provide an integrated presentation of the health programs in which the Organization is to collaborate. This will facilitate an over-all analysis of the proposed distribution of funds by geographical location, as well as by major fields of activity. In this manner, all sources of funds are taken into consideration as a whole, thereby emphasizing the fact that the program of PASB/WHO is one, irrespective of the financial sources expected to be available for its implementation.

In preparing the Program and Budget for 1957, special attention has been given to the application of the principles established in Resolution III of the VII Meeting of the Directing Council, dealing with the development of a plan of long-range public health programs. The desire of the Council to strengthen the fundamental health services of Member Governments is reflected chiefly through integrated public health projects. The interest of various countries in this type of project is evidence of a growing realization that reorganization of basic health services is essential for achieving modern standards in national health programs.

In following the emphasis on training laid down by the above-mentioned Resolution, most of the individual projects have provision for the technical preparation of national personnel. In addition, several projects are specifically devoted to schools of medicine and public health,

to nursing education, and to seminars and courses, all aimed at expanding the facilities and raising the standards for education and training of personnel for the health services of the Member Countries.

Special consideration has been given to coordination and assistance in the planning and operation of individual or regional programs of eradication. For that purpose, projects are included with an objective of the eradication of some communicable diseases or vectors. Included are projects whose basic purpose is the continuation of the activities for the eradication of *Aedes aegypti* in several countries. Provision also is made for regional coordination and stimulation of field activities in this subject.

The smallpox eradication program, established by the Directing Council in 1952, received further financial support by the authorization given by the XIV Pan American Sanitary Conference to use the Pan American Sanitary Bureau surplus funds from 1953, totalling \$144,089. This will provide special funds to continue the implementation of this program in 1957 and future years.

Special mention should be made of the malaria eradication program, which the Bureau is carrying out under the mandate of the Pan American Sanitary Conference. The financing of the program received substantial support through the allocation by the XIV Conference of \$100,000 from the surplus funds of 1954. For the same purpose, the Conference authorized an increase of \$100,000 in the 1956 budget of the Pan American Sanitary Organization. A similar amount is incorporated in the Proposed Budget of the Pan American Sanitary Organization for 1957. This has permitted the intensification of the activities of coordination and technical supervision of the anti-malaria activities which are being carried out in the continent. This coordinating role is one of utmost importance for the conversion of the existing malaria control programs into eradication programs as directed by the XIV Pan American Sanitary Conference.

UNICEF has given the highest priority to malaria eradication programs as being suitable for its financial support. It is further expected that assistance from UNICEF in substantial amounts will be made available for carrying out malaria eradication programs in the Americas to which PASB/WHO will provide technical advice and orientation. The decision of UNICEF to embark on this enterprise has been endorsed by the UNICEF-WHO Joint Committee on Health Policy, and it is expected to aid considerably in the eradication of malaria from the Western Hemisphere.

The Executive Committee at its 25th Meeting, considering the importance of the malaria problem which demands concerted action on the part of all agencies and organizations and which merits prior attention over the other public health problems, concurred in the recommendation made by the Director to allocate for the program, part of the 1954 surplus funds of the Bureau in the amount of \$54,593.75. It also recommended that the Directing Council authorize the Director to utilize as much of the recommended Building Reserve Fund as may be required, in the event that additional funds be necessary for the intensification of the program. It is earnestly hoped that the VIII Meeting of the Directing Council will approve the recommendations made by the Director and the Executive Committee.

It is interesting to point out that the basis for the preparation of the Program and Budget for 1957 was the consultation made by the Zone Offices with the several health authorities of the Member Governments. This document tries, therefore, to comply with the opinion and

desires of the Governments concerned.

Finally, it must be indicated that besides the field activities described under specific projects, a substantial contribution to the field program is made through technical advisory services provided upon request by the regular staff members of the Zone and Washington Offices. These technical consultation services are being increasingly used by the health authorities and have proven to be an important part of the work of the Organization, aiming toward the strengthening of the health services of the Member Governments.

METHOD OF PREPARATION

Preface

The budget for 1957 has been prepared in accordance with established methods and procedures into which have been incorporated the terms of Resolution II of the 25th Meeting of the Executive Committee of the Pan American Sanitary Organization.

The Resolution calls for the following two major changes in regard to the preparation of the budget:

First, the approval of the principle of the presentation of a single document incorporating budget estimates for both the Pan American Sanitary Organization and the World Health Organization for the Region of the Americas; and

Second, the introduction of certain changes in the format of the budget document while maintaining the degree of detail displayed in the 1956 budget document.

Programs and Estimates Presented

The budget contains the proposed program and estimated cost of health and related activities for the Pan American Sanitary Organization for the year 1957. It also includes the proposed program and budget for 1957 in respect of the World Health Organization for the Region of the Americas.

Shown for review and recommendation are estimated 1957 costs of health and related activities in the Western Hemisphere expected to be financed from United Nations Technical Assistance funds administered by the Regional Office of the Americas. These estimates are based on data available at the time of the preparation of this document.

Estimates included under the heading "Other Extra Budgetary Funds" deal with activities to be financed from available and pledged funds as per information on hand at the time of the budget preparation and comprise funds from Technical Assistance of the Organization of American States and the Institute of Nutrition of Central America and Panama, various grants, and also funds appropriated by the Directing Council for PASO activities over and above approved budget ceilings and derived from savings on previous years' operations.

In addition, estimates are included for anticipated participation of the United Nations Children's Fund for activities related to health in the Western Hemisphere.

Amounts marked with an asterisk signify allocations actually approved by the Executive Board of UNICEF for the projects displayed. Other estimates are provisional and are based on plans current at the time of the preparation of the budget.

The 1955 and 1956 budget estimates comprising the same four categories of funds are presented for comparison only, since separate budgets for these years have been submitted previously. The estimates for these two years have been adjusted to reflect in this new presentation any changes due to revised planning and intervening developments.

Modifications in Presentation

In accordance with Resolution II of the 25th Meeting of the Executive Committee of PASO a number of modifications have been introduced in the format.

The document has been reduced to half the size as compared with the 1956 budget, the pages have been more fully utilized, and the table of contents expanded. Also, cross references between text and schedules have been inserted.

Text and schedules have been separated in such a way that the book is divided into two parts. The first part contains the text in its entirety; the other part, all the schedules. Finally, the sources of funds have been rearranged on the schedules showing PASO and WHO estimates on the left page and the UN/TA and OEBF estimates on the opposite right page.

Contents

This document includes the Director's Letter of Transmittal and Authority, salary scales, various informational summaries, descriptions of activities and projects and schedules of estimated expenditures for the years 1955, 1956 and 1957 displayed in four categories according to source of funds with estimates in totals for all funds.

Also presented is a tentative scale of assessments of the Member States of the Pan American Sanitary Organization based on the 1955-1956 scale of the Pan American Union.

The schedules are arranged in three parts: Part I, "Pan American Sanitary Organization", consists of three sections, entitled "Conference Services", "Organizational Meetings" and "Common Staff Costs", the latter being various cost items over and above regular salaries to staff members listed in this part of the budget; Part II, "Pan American Sanitary Bureau - Headquarters" shows the personnel assigned to Headquarters, Washington, D. C., and activities closely related to Headquarters and has been divided into six sections, viz., "Executive Offices", "Division of Education and Training", "Division of Administration", "Division of Public Health", "Common Staff Costs" (being various cost items over and above regular salaries to staff members listed in Part II), and "Common Services" for Headquarters; Part III, "Pan American Sanitary Bureau - Field and Other Programs," covers the Zone Offices (including Field Offices), Programs and Publications.

The schedules of detailed estimated expenditures, exhibit the number of posts according to functions and salary grades, the estimated cost for salaries and various other items by source of funds, over-all total, and by years (the budget year 1957 and the two preceding years).

The summary schedules are:

A summary of posts and estimated expenditures in U. S. dollars by parts and source of funds.

A functional summary of posts and estimated expenditures in U. S. dollars by activity or program and source of funds.

A summary by related activity in U. S. dollars and percentage by source of funds.

A summary in U. S. dollars by source of funds and by major items of expenditures (Personal Services and Allowances, Travel and Transportation, Supplies and Equipment, Fellowships and Participants, and Contractual Agreements).

Separate summaries for each source of funds listing all the projects and the estimated expenditures in U. S. dollars grouped by major program activity.

A summary by source of funds in U. S. dollars of total expenditures of field operations under each Zone Office and Headquarters.

A summary of posts by parts divided into professional and local personnel.

Under each organizational unit in Parts I and II are displayed estimates of Personal Services (salaries) and Cost-of-Living Adjustments. Allowances for dependents, repatriation grant, contributions to the U. N. Joint Staff Pension Fund and the respective share of premiums for accident and sickness insurance contributed by the respective organizations, home leave travel, recruitment travel, and reimbursement of income tax with respect to the staff, have been grouped under a sectional heading entitled "Common Staff Costs" at the end of Part I and Part II. In Part III, these estimated costs are shown under the individual Zone Offices, Field Offices or projects as applicable.

Other non-staff costs have been displayed under the appropriate activities and projects.

Where projects are carried on in more than one country but fall within the jurisdiction of a single Zone and that Zone Office is responsible for the administration of such projects, they have been shown under the heading

"Inter-Country Programs" and incorporated into the total programs of the Zone. In cases where projects are carried on in more than one Zone, they have been shown as a separate category entitled "Inter-Zone Programs".

Method of Computation

The situation as of 1 January 1955 has been used for projecting salaries and Common Staff Costs for all established positions under Parts I and II of the Budget, Zone and Field Offices. New positions, if any, have been costed as from the date they are expected or planned to be filled. Positions planned to be abolished have been costed through the projected termination date.

Vacant and new positions in projects have been costed from the date they are expected or planned to be filled except in cases of new projects under WHO and UN/TA funds. As to WHO, such posts have been costed from the beginning of the operating year, however, with a factor of an estimated three months' delay in recruitment applied to such posts and deducted from the over-all total of the projects. In the case of UN/TA, posts in new projects have been costed for nine months only in the initial year, and this is reflected in the estimates for the projects affected.

When computing the personnel costs, actual entitlements have been used for filled positions. In respect of vacant positions, the base pay of the appropriate grade has been applied in computing salaries. For other personnel costs appropriate averages have been used for vacant positions. Averages used, which appear below, differ according to source of funds. The differences arise from the fact that the PASO averages are derived from experience in the Americas, whereas WHO and UN/TA averages are based on world-wide data.

Estimated costs other than personnel costs have been based on actual requirements, plans, or experience.

Savings derived from turnover of personnel during the operating years are not reflected in the budget since any such savings are expected to cover terminal accrued leave payments, temporary personnel, increments due to language proficiency, additional children's allowances, education grants, and other imponderable factors for which no provisions have been made in the budget.

INTERNATIONAL STAFF

<u>Permanent Staff</u>	<u>PASB</u>	<u>WHO and UN/TA</u>		
	<u>All Grades</u>	<u>D2-P5</u>	<u>P4-P3</u>	<u>P2-P1</u>
Dependents' Allowance (including Education Grant)	\$ 400	\$ 290	\$ 230	\$ 110
Installation Allowance	Actual prevailing rates	800	750	400
Travel on Initial Recruitment and Repatriation	1,500	750	500	200
Home Leave Travel	1,100	1,900	1,100	600
Transportation of Household Effects	1,500	600	450	200

<u>Project Staff</u>	<u>PASB</u>	<u>WHO and UN/TA</u>	
	<u>All Grades</u>	<u>Pl-P3</u>	<u>P2-P1</u>
Dependents' Allowance (including Education Grant)	\$ 600	\$ 250	\$ 50
Installation Allowance	Actual pre-vailing rates	600	450
Travel on Initial Recruitment and Repatriation (including Field Equipment Allowance)	700	900	800
Home Leave Travel	1,000	750	750

<u>Short-term Consultants</u>	<u>PASB</u>	<u>WHO and UN/TA</u>	
		<u>Senior</u>	<u>Junior</u>
Fees	\$ 700	\$ 700	\$ 400
Travel	600	600	600

<u>Other Averages</u>	<u>PASB</u>	<u>WHO and UN/TA</u>	
Repatriation Grant	Actual entitlements for filled posts	\$ 100	\$ 100

SALARY SCHEDULES

INTERNATIONAL STAFF WAGE SCALE U. S. Dollars

	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	
D 1	10,000	10,400	10,800	11,200	11,600	12,000				
D 2	11,000	11,400	11,800	12,200						
PD	12,000	12,500								

ANNUAL LOCAL WAGE SCALE - WASHINGTON U. S. Dollars

	I	II	III	IV	V	VI	VII	VIII
WL 1	1,960	2,045	2,130	2,215	2,300	2,385	2,470	2,555
WL 2	2,100	2,185	2,270	2,355	2,440	2,525	2,610	2,695
WL 3	2,375	2,465	2,555	2,645	2,735	2,825	2,915	3,005
WL 4	2,655	2,770	2,885	3,000	3,115	3,230	3,345	3,460
WL 5	2,890	3,020	3,150	3,280	3,410	3,540	3,670	3,800
WL 6	3,150	3,290	3,430	3,570	3,710	3,850	3,990	4,130
WL 7	3,440	3,600	3,760	3,920	4,080	4,240	4,400	4,560
WL 8	3,800	3,980	4,160	4,340	4,520	4,700	4,880	5,060

Salary Schedules (continued)ANNUAL LOCAL WAGE SCALE - EL PASO
U. S. Dollars

	I	II	III	IV	V	VI	VII
EPL 1	1,500	1,560	1,620	1,690	1,760	1,840	1,930
EPL 2	2,000	2,070	2,140	2,220	2,300	2,390	2,500
EPL 3	2,400	2,470	2,550	2,650	2,750	2,860	2,980

ANNUAL LOCAL WAGE SCALE - FIELD OFFICE OF CARIBBEAN (JAMAICA)
Expressed in U. S. Dollars

	I	II	III	IV	V	VI	VII	VIII
JL 1	400	430	460	490	520	550	580	610
JL 2	725	775	825	875	925	975	1,025	1,075
JL 3	1,200	1,260	1,320	1,380	1,440	1,500	1,560	1,620
JL 4	1,750	1,830	1,910	1,990	2,070	2,150	2,230	2,310
JL 5	2,050	2,140	2,230	2,320	2,410	2,500	2,590	2,680
JL 6	2,400	2,500	2,600	2,700	2,800	2,900	3,000	3,100

ANNUAL LOCAL WAGE SCALE - ZONE II (MEXICO)
Mexican Pesos

	I	II	III	IV	V	VI	VII	VIII
ML 1	6,500	6,850	7,200	7,550	7,900	8,250	8,600	8,950
ML 2	9,000	9,450	9,900	10,350	10,800	11,250	11,700	12,150
ML 3	11,500	12,050	12,600	13,150	13,700	14,250	14,800	15,350
ML 4	14,000	14,600	15,200	15,800	16,400	17,000	17,600	18,200
ML 5	17,500	18,200	18,900	19,600	20,300	21,000	21,700	22,400
ML 6	21,000	21,850	22,700	23,550	24,400	25,250	26,100	26,950
ML 7	25,000	26,000	27,000	28,000	29,000	30,000	31,000	32,000
ML 8	30,000	31,200	32,400	33,600	34,800	36,000	37,200	38,400

ANNUAL LOCAL WAGE SCALE - ZONE III (GUATEMALA)
Guatemalan Quetzales

	I	II	III	IV	V	VI	VII
QL 1	720	760	800	840	880	920	960
QL 2	900	960	1,020	1,080	1,140	1,200	1,260
QL 3	1,200	1,290	1,380	1,470	1,560	1,650	1,740
QL 4	1,500	1,590	1,680	1,770	1,860	1,950	2,040
QL 5	1,800	1,900	2,000	2,100	2,200	2,300	2,400
QL 6	2,100	2,200	2,300	2,400	2,500	2,600	2,700
QL 7	2,400	2,520	2,640	2,760	2,880	3,000	3,120
QL 8	2,700	2,820	2,940	3,060	3,180	3,300	3,420
QL 9	3,000	3,120	3,240	3,360	3,480	3,600	3,720

Salary Schedules (continued)ANNUAL LOCAL WAGE SCALE - INCAP (GUATEMALA)
Guatemalan Quetzales

	I	II	III	IV	V	VI	VII
GL 1	720	760	800	840	880	920	960
GL 2	900	960	1,020	1,080	1,140	1,200	1,260
GL 3	1,200	1,290	1,380	1,470	1,560	1,650	1,740
GL 4	1,500	1,590	1,680	1,770	1,860	1,950	2,040
GL 5	1,800	1,900	2,000	2,100	2,200	2,300	2,400
GL 6	2,100	2,200	2,300	2,400	2,500	2,600	2,700
GL 7	2,400	2,520	2,640	2,760	2,880	3,000	3,120
GL 8	2,700	2,820	2,940	3,060	3,180	3,300	3,420
GL 9	3,000	3,120	3,240	3,360	3,480	3,600	3,720
GL 10	3,600	3,750	3,900	4,050	4,200	4,350	4,500
GL 11	4,500	4,700	4,900	5,100	5,300	5,500	5,700
GL 12	5,700	5,900	6,100	6,300	6,500	6,700	6,900

ANNUAL LOCAL WAGE SCALE - ZONE IV (LIMA) (Effective 1 April 1955)
Peruvian Soles

	I	II	III	IV	V	VI	VII	VIII	IX
LL 1	9,000	10,000	11,000	12,000	13,000	14,000	15,000		
LL 2	15,000	16,000	17,000	18,000	19,000	20,000	21,000		
LL 3	22,500	24,000	25,500	27,000	28,500	30,000	31,500	33,000	34,500
LL 4	30,000	31,500	33,000	34,500	36,000	37,500	39,000	40,500	42,000
LL 5	36,000	38,000	40,000	42,000	44,000	46,000	48,000	50,000	52,000
LL 6	46,000	48,000	50,000	52,000	54,000	56,000	58,000	60,000	62,000
LL 7	54,000	56,500	59,000	61,500	64,000	66,500	69,000	71,500	74,000

ANNUAL LOCAL WAGE SCALE - ZONE V (RIO DE JANEIRO)
Brazilian Cruzeiros

	I	II	III	IV	V	VI	VII	VIII	IX	X
RL 0	25,200	26,400	27,600	28,800	30,000	31,200	32,400	33,600	34,800	36,000
RL 1	30,250	32,065	33,880	35,695	37,510	39,325	41,140	42,955	44,770	46,585
RL 2	48,400	50,820	53,240	55,660	58,080	60,500	62,920	65,340	67,760	70,180
RL 3	72,600	76,230	79,860	83,490	87,120	90,750	94,380	98,010	101,640	105,270
RL 4	101,640	106,480	111,320	116,160	121,000	125,840	130,680	135,520	140,360	145,200
RL 5	139,150	145,200	151,250	157,300	163,350	169,400	175,450	181,500	187,550	193,600
RL 6	163,350	170,610	177,870	185,130	192,390	199,650	206,910	214,170	221,430	228,690

ANNUAL LOCAL WAGE SCALE - ZONE VI (BUENOS AIRES)
Argentinean Pesos

	I	II	III	IV	V	VI
BAL 1	14,400	15,600	16,800	18,000	19,200	20,400
BAL 2	15,600	16,800	18,000	19,200	20,400	21,600
BAL 3	18,000	19,200	20,400	21,600	22,800	24,000
BAL 4	25,200	27,600	30,000	32,400	34,800	37,200
BAL 5	35,400	38,400	41,400	44,400	47,400	50,400
BAL 6	38,400	41,400	44,400	47,400	50,400	53,400
BAL 7	60,000	63,600	67,200	70,800	74,400	78,000

ANNUAL LOCAL WAGE SCALE (Tentative)
INTER-AMERICAN CENTER OF BIOSTATISTICS (Santiago, Chile)
Chilean Pesos

	I	II	III	IV
Grade 1	228,000	243,960	259,920	275,880
Grade 2	264,000	282,480	300,960	319,440
Grade 3	288,000	308,160	328,320	348,480
Grade 4	456,000	487,920	519,840	551,760

TENTATIVE SCALE OF ASSESSMENTS OF THE
MEMBER STATES OF THE PAN AMERICAN SANITARY
ORGANIZATION FOR THE FINANCIAL YEAR ENDING
31 DECEMBER 1957, BASED ON THE PAN AMERICAN
UNION SCALE OF 1955-1956

Country	Percentage	Amount
	%	\$
Argentina	7.40	155,400
Bolivia	0.31	6,510
Brazil	8.02	168,420
Chile	1.82	38,220
Colombia	2.49	52,290
Costa Rica	0.24	5,040
Cuba	1.82	38,220
Dominican Republic	0.31	6,510
Ecuador	0.24	5,040
El Salvador	0.37	7,770
Guatemala	0.43	9,030
Haiti	0.24	5,040
Honduras	0.24	5,040
Mexico	4.86	102,060
Nicaragua	0.24	5,040
Panama	0.31	6,510
Paraguay	0.24	5,040
Peru	1.09	22,890
United States	66.00	1,386,000
Uruguay	1.09	22,890
Venezuela	2.24	47,040
	<u>100.00</u>	<u>2,100,000</u>

Assessments in respect to the territories of:*

France	5,044
Netherlands	2,488
United Kingdom	15,000

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 Sanitary Organization. This scale which is presented for informational purposes only, is the 1955-1956 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.

PROPOSED APPROPRIATIONS RESOLUTION

THE DIRECTING COUNCIL

RESOLVES:

1. To appropriate for the financial year 1957 an amount of \$ _____ as follows:

Purpose of Appropriation

PART I PAN AMERICAN SANITARY ORGANIZATION

PART II PAN AMERICAN SANITARY BUREAU - HEADQUARTERS

PART III PAN AMERICAN SANITARY BUREAU - FIELD AND OTHER PROGRAMS

Total - All Parts \$ _____

Less:

Estimated Miscellaneous Income \$

Contributions on behalf of the territories of France, the Netherlands, and the United Kingdom

Total _____

TOTAL FOR ASSESSMENT \$ _____

2. Amounts not exceeding the appropriations noted under Paragraph 1 shall be available for the payment of obligations in accordance with the Financial Regulations of the Bureau incurred during the period 1 January to 31 December 1957, inclusive.

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

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

PART I

PAN AMERICAN SANITARY ORGANIZATION

SECTION 1 - Conference Services (See page 72)

The Conference Services Office organization and staffing are the same as in previous years. The increase in costs between years results from the within-grade salary increments of the incumbents.

The staff will assist, as in the past, at the several meetings of the governing bodies of the Organization, at meetings of the governing body of the Institute of Nutrition of Central America and Panama, and at other special meetings as required.

SECTION 2 - Organizational Meetings (See page 72)

Provision is made in Chapter 1 for the meetings of the Executive Committee which precede and follow the meeting of the Directing Council, as well as for the meeting of the Council itself. The higher anticipated expenditure in 1956 reflects the fact that the cost of the meeting is based on the assumption that it will be held at a mid-point in South America rather than in Washington. For meetings held away from Headquarters it is necessary to include provision for travel and transportation and for the hiring of local personnel not incurred when the meeting is held in Washington.

Estimated costs under Chapter 2 provide for the meeting of the Executive Committee which is usually held in April at Washington. These estimates are based on previous years' experience and reflect no increase in costs.

SECTION 3 - Common Staff Costs (See page 72)

The higher costs in 1956 are occasioned in large part by the higher incidence of eligibility for home leave in that year. A more detailed explanation of the Common Staff Costs items will be found under the narrative for this item in Part II of the budget.

PART II

PAN AMERICAN SANITARY BUREAU - HEADQUARTERS

SECTION 1 - Executive Offices (See page 74)

The Executive Offices are composed of the Office of the Director, the Office of Public Information, the Office of Coordination, the Editorial Office, and the Library. The Assistant Director and the Secretary General are included under the Office of the Director. These officials have responsibility for the subordinate elements of the Executive Offices. The Assistant Director has direct responsibility for the Offices of Coordination and Public Information; the Secretary General has responsibility for the Editorial Office and the Library, as well as for the Conference Services Office, which appears in Part I of the budget.

Provision is made under the Office of the Director

for the WHO Medical Adviser to UNICEF/TARO, for necessary consultant services, for the Reports Officers, and for the clerical staff assigned to the senior officials. Duty travel for all personnel of the Executive Offices is shown under the Office of the Director.

Anticipated expenditures for informational activities, as well as the salary costs of the office personnel, are shown under the Office of Public Information. Planning with respect to public information anticipates a continuing increase of interest in the activities of the Bureau, and a proportionate increase in informational activity. This will be reflected especially in broad dissemination of Newsletters and other informational material; and in continuing efforts to assure the maximum display of exhibits portraying the work of the Bureau.

Estimates for the Library include the usual provision for acquisition of books, pamphlets, periodicals, manuscripts, documents, and other printed material relating to the work of the Bureau. This material, classified and catalogued, constitutes a permanent record of the Bureau's activities that is constantly revised as progress continues in the Americas. Additionally, the Library material constitutes the primary reference source for the technical personnel on developments in the field of public health.

The total estimates for the Executive Offices generally follow the pattern of past years. Normal within-grade increments constitute a portion of the increase between years, and the 1955 totals are slightly lower than succeeding years, owing to partial occupancy of several posts in that year. Other factors influencing the estimates are the addition of an item for necessary consultant services and the transfer to the Washington Office allotment of the salary costs for the Adviser to UNICEF/TARO.

SECTION 2 - Division of Education and Training
(See page 76)

A primary mission of the Organization is the development of means for augmenting the present short supply of qualified technicians in the field of public health. To stimulate the interest of governments and of professional groups, the Division has established a broad program of seminars, which provide one of the most fruitful means of establishing a basis for the exchange of ideas. The planning and organization of a number of such meetings is reflected in the project estimates for the year.

As one means of overcoming the problem, an Information Center has been established to coordinate information concerning the activities of all groups that are interested in promoting medical and related education in the Americas, in order to eliminate duplication of effort and to indicate areas where concentration is demanded.

Another element of the program is the cooperation given to the schools of public health throughout the Americas in the form of information on the suitability of proposed courses, recommendations as to curricula, and advice as to methods of implementation. This cooperation will be enhanced through visiting professors, advisers on organization and conduct of courses, seminars on subjects in the school's curriculum, preparation of basic instruction material, and the granting of fellowships to help prepare educators for key teaching jobs.

The growth of schools of public health that accept

international students has been of great interest to the Organization. The Division will continue to encourage their development, recognizing the need for utilizing educational resources to the maximum and conscious of the value of providing for instruction of the student in his own language.

Stress will be placed on development of courses for the training of auxiliaries, as well as professionals, particularly in the fields of nursing education and public health engineering. Properly trained and supervised auxiliaries are essential members of a balanced public health team.

The budgetary estimates for the Division are approximately the same as in previous years. The staff has been increased by the addition of a nurse in the Fellowships Branch, as a result of increased concentration on nursing education. The usual provisions for within-grade increments and for the duty travel of the staff are included.

SECTION 3 - Division of Administration (See page 78)

Provision of the personnel, budgetary, fiscal, procurement and other related services, as well as development of means for further improving the efficiency of these functions are the responsibilities of the Division of Administration.

A problem requiring concentrated effort is the recruitment of qualified technical personnel and the general expansion of program activities of the Organization will make this problem more acute. In collaboration with the other offices, the Division is increasing the scope of the recruiting effort through expansion of contacts with governments, with other organizations, and with professional groups. The cooperation of these groups and of the Ministries of the Member Governments is a necessity if lack of personnel is not to impede the commencement of programs.

As a part of the recruiting effort, a roster of skilled professional personnel for international health in the Americas is being developed. Progress has been made in the engineering and nursing fields, and it is expected that by 1957 all the fields of interest to the Organization will be covered. This roster, with constant revision, will be the basic source for provision of skilled advisory services in the Americas.

In the budgetary and fiscal area, an improved system of funds-control has been put into effect. In the implementation of program activities, it is inevitable that delays will result for one reason or another and that funds allotted for a specific purpose in one year may not be fully spent in that year. By close scrutiny of rates of expenditure, it is possible to recall portions of allotments that might not be spent and to utilize them for other program purposes. This system should result in the employment of greater amounts of funds for program activities.

The procurement of supplies and equipment for Member Governments is a field in which the volume of activity is expanding. The actual volume of orders placed and the number of requests for quotations have increased year by year and are expected to continue to rise in the future.

The continuing study of more effective means of operation presents a number of problems. The complexities of utilizing funds from several sources create difficulties ranging from the question of different conditions of employment for persons paid from different funds, to the maintenance of separate account records for each fund. The effect

of these overriding conditions is to limit the possibilities for improvement in systems and procedures. Further, the increase in program activity will mean a similar increase in administrative workload. While a net reduction of thirty posts has been effected in the Division in the past three years, it would appear that the irreducible minimum has been reached and that concentration will now be on an effort to meet the increasing workload without an increase in staff. The principal means to be utilized will be the improvement of existing procedures within over-all limitations and the continuous effort to assure the maximum utilization of personnel.

SECTION 4 - Division of Public Health (See page 80)

The Division's performance of its responsibilities in the planning, review, and advisory service activities has been consistently expanded, despite a reduction in personnel. In 1954 and 1955, study of means for better execution of these responsibilities was carried on simultaneously with the actual performance of the functions. It is anticipated that by 1956 the results of those plans will be reflected in improved operations and in attainment of a number of the major objectives of the Division.

Essential to the success of balanced program-planning is the collection of basic data concerning the health, social, and economic conditions and the available resources of the Member Countries. A significant advance in this area was the submission by the Member Governments of reports for the period 1950-1953 on public health conditions and progress achieved. The development of improved collection methods and of outlines of required data, commenced in 1954, was well-advanced by mid-1955. By 1957, it is expected that most of the initial data will be collected, analyzed, and available for use by the Member Governments. Another phase of the planning activity, which has received increasing emphasis is the development of principles, standard methods, and techniques of operation.

In the review area, the difficulties of converting program evaluation from a "special study" basis to a routine program function have largely been overcome. The planning was well-advanced in 1954, and in 1955 field tests were conducted with a simplified system. Complete conversion to a routine process should be accomplished by 1956.

The provision of advisory services will continue on an expanded basis in 1956-1957. The Divisional staff of twelve professional personnel will continue to be given special field assignments at the Zone and Field Offices and on projects. This will serve the dual purpose of bringing the specialized abilities of the Headquarters personnel directly to the operating level, while constantly renewing their familiarity with actual field problems and conditions. The staff of the Division will continue to share a major responsibility in the recruitment of professional personnel and in the operation of Inter-Zone programs.

Organizationally, the three Branches of the Division retain their planning, review, and advisory service functions within their separate program areas of communicable diseases, health promotion, and environmental sanitation. In practice, the organizational separation is more of an administrative character, since the interchange of responsibilities and ideas within the Division is in constant process. Similarly, the Division is continuing to put into practice the principle of better operations and improved efficiency through close collaboration with other organizational elements of the Bureau.

There has been a reduction in both total posts and costs for the Division as compared with previous budget estimates. The Health Educator has been transferred to a field position, and a Medical Officer post was suppressed upon resignation of the incumbent. The Dental Officer post, which was created through funds made available by a Kellogg Foundation grant, will be transferred to PASB funds at the expiration of the grant in 1957.

SECTION 5 - Common Staff Costs (See page 82)

Common Staff Costs comprise dependents' allowance, repatriation grant, the Organization's contribution to the U. N. Pension Fund, the Organization's contribution to staff insurance, home leave travel, recruitment travel, and reimbursement of income tax. These costs, which cover all charges for personal services other than salary and cost-of-living charges, are grouped at the end of Parts I and II of the budget, rather than being attributed to the individual offices within each Part.

Dependents' allowance is computed on the basis of the known entitlements of staff, at the time of preparation of the budget, for all occupied positions. A factor is applied for all vacant positions.

Repatriation grant is based on years of service at an official station outside the staff member's home country and is payable in the year of termination of contract. After completion of two years of service, a staff member without dependents is entitled to four weeks of salary. A staff member with dependents is entitled to eight weeks of salary. For each additional year of service outside the home country, the staff member without dependents earns one additional week and the staff member with dependents earns two weeks, with a maximum of \$2,500 and \$5,000 respectively.

PASB budgetary provision is made annually on the basis of liabilities to be incurred during the year. Funds accrued are placed in a reserve fund from which all earned payments are made at the time of termination. WHO budgetary provision is made annually on the basis of an average of \$100 for each eligible staff member. Since WHO does not establish a reserve, all payments are met from the current year's provision.

The Organization's contribution to the U. N. Pension Fund is equal to 14% of the staff member's salary, exclusive of allowances, and the small increase is in proportion 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. On salaries below \$5,000, the Bureau and WHO contribute .875% of the base salary and the staff member contributes .325%. For salaries above \$5,000, the contributions are .725% and .475%, respectively. For budgetary purposes, the Organization's contributions were estimated on an average of 1% for all staff.

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 every two years from the date of appointment, the incidence of budgetary requirement varies with the appointment dates. The rise in estimated cost in 1956 is occasioned by the large number of staff members eligible in that year. Provision in 1957 in Part II is based on the anticipation that all vacant posts will be filled in 1955. Thus, eligibility will be earned by 1957.

Recruitment travel estimates are based on the known vacant positions at the time of preparation of the document. As noted above, it is anticipated that all present vacancies will be filled in 1955. Should vacancies requiring recruitment travel occur in subsequent years, the savings on home leave travel for the departing staff member are estimated to offset the recruitment and repatriation costs.

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

SECTION 6 - Common Services (See page 84)

The estimates for the various Common Services for the Washington Offices are shown in detail in the schedules. All costs are divided on a pro-rata basis between PASO, WHO, and UN/TA funds, except where an asterisk appears. The asterisked items are charged directly to the appropriate sources of funds.

Rate increases were granted to the following utilities: water, telephone, and electricity. An increase in rates for insurance also affected the previous estimates. However, savings anticipated from the improved stock-control system have been realized, and a close control on telephone toll calls resulted in a reduction from the previous year's budget estimates. Some savings are also anticipated in areas of elevator maintenance, building and equipment, maintenance, photographic work, and others.

The estimates for services and supplies are fractionally lower than in the previous estimates. Small increases have been shown under the item of Acquisition of Capital Assets, which is provided for the replacement of obsolete and unserviceable equipment.

From the over-all standpoint, despite the increases in some items, savings have made it possible to maintain the level previously estimated for 1955. It is anticipated that this level will be maintained in 1956 and 1957.

PART III

PAN AMERICAN SANITARY BUREAU
FIELD AND OTHER PROGRAMSZone and Field Offices

In accordance with the principles enunciated by the governing bodies, and with the aims of assuring that the planning and implementation of programs achieve maximum effectiveness in meeting the needs of Member Governments, and of contributing to the strengthening of national health services, the Pan American Sanitary Bureau, Regional Office of the World Health Organization for the Americas, established a plan for decentralization of its activities. Under this plan, the Americas were geographically divided into six areas, each of them to be served by a Zone Office, except in the case of Zone I, responsibility for which was retained by the Washington Office. These six Zones are as follows:

Zone I: Alaska, Canada, United States, and the non-self-governing territories, except British Honduras. Activities in Zone I are under the jurisdiction of the Washington Office, but responsibility for supervision of the activities dominant in the Caribbean Area is delegated to the Field Office located in Kingston, Jamaica. The Office established in El Paso is an inter-country field program concerned with stimulating cooperation and coordination of activities among border health officers of Mexico and the United States in solving common health problems.

Zone II: Cuba, Dominican Republic, Haiti, and Mexico. The Zone Office is located in Mexico, D. F. (See page 92)

Zone III: Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, Panama, and British Honduras. The Zone Office is located in Guatemala City, Guatemala. (See page 106)

Zone IV: Bolivia, Colombia, Ecuador, Peru, and Venezuela. The Zone Office is located in Lima, Peru. (See page 120)

Zone V: Brazil. The Zone Office is located in Rio de Janeiro, Brasil. (See page 136)

Zone VI: Argentina, Chile, Paraguay, and Uruguay. The Zone Office is located in Buenos Aires, Argentina. (See page 144)

The Principles of Decentralization reserved for Headquarters the responsibility for provision of certain technical and administrative services that can be more efficiently carried out from the Washington Office. Under these Principles, the responsibility and authority for relations with the governing bodies of the Organization and their Members are retained by the Director.

The Zone Offices are responsible for operational program activities, both in the provision of direct technical advice to health administrations and in the field planning and operation of projects. This system has had the advantage of making the technical advice of Zone staff continuously available to the governments. Further, it 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 and Field Offices are arranged as in previous years. Duty travel and common staff costs for personnel of the offices appear under the personnel

services estimates for each office; 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, repatriation grant, and dependents' allowance cause some fluctuation between years, since computations are based on known eligibility at the time of preparation of this document. A more detailed explanation of the common staff cost computations may be found under Part II, "Method of Preparation". Common services estimates are based on the experience of the previous years. The item for Acquisition of Capital Assets is for the purpose of replacing obsolete equipment. Where a larger amount is shown in any one year, it is anticipated that the replacement of an obsolete vehicle will be required.

ZONE I.

Barbados-2, Local Health Services
(See page 86)

In 1953, at the request of the Government of Barbados, a survey of the health services was carried out by three consultants of the Organization. The survey report and recommendations, which dealt largely with fundamental principles, organization, and operation as applicable to the health services of the island, were subsequently accepted by the Government.

In 1954 steps were taken to implement the recommendations, with particular reference to the centralization of responsibility in the Director of Medical Services, and to the organization of three regional health centers, each responsible for the development and coordination of health activities in a specific number of parishes. Construction was begun on a 50-bed tuberculosis wing and also a pediatric wing for the general hospital, a health center located in Bridgetown for the central parishes, and housing for a central public health laboratory. The same year, the Government requested collaboration in the development and orientation of the reorganized health service, with particular reference to maternal and child health, venereal-disease and tuberculosis control, environmental sanitation, statistical reporting, health education, training of auxiliaries, and the development of a public health laboratory. Particular emphasis will be given to the development of regional centers and to the improvement of the cottage hospitals of each region.

It is expected that the project will result in the development of a comprehensive and integrated public health service suited to the particular problems and economic possibilities of Barbados and consequently will bring about a progressive reduction in general morbidity and mortality.

Supplies and equipment have been provided by UNICEF. The Organization will provide, through 1957, the services of a public health administrator, a public health nurse, and a public health laboratory adviser. Long-term fellowships are also provided.

Jamaica-5, Public Health Administration Fellowships
(See page 86)

The Government of Jamaica, desiring to expand and improve its health services, has requested the assistance of the Organization in the training of public health personnel. It has submitted applications for fellowships in 1955 for four persons for training in public health fields, primarily public health administration.

This project supplements the technical advice given by members of the staff of the Organization, as well as the fellowships previously given by the Organization with the objective of improving the health services of the country.

French Guiana-1, Maternal and Child Health
(See page 86)

This is a project for the development of maternal and child health services throughout the country as part of the expansion of the general health services. UNICEF is expected to provide equipment and supplies. Technical advice will be given by the staff of the Field Office for the Caribbean and by the Regional Office.

Surinam-3, BCG Vaccination
(See page 86)

The Health Department of Surinam has devoted considerable effort to the development of an adequate program of tuberculosis control. As a further step, the Government requested the collaboration of the Organization and of UNICEF in the establishment of a BCG vaccination program, which will be continued afterward by the Health Department as an activity of the local health services. The Organization is providing technical advice for the program in addition to the training of local personnel. UNICEF is providing supplies and equipment and reimbursing the cost of a short-term consultant.

United States-7, Public Health Administration Fellowships
(See page 86)

At the request of the Government of the United States, the Organization awarded two fellowships in 1955, one for study of patterns of organization of mental health services in several European countries, and the other for the study of environmental sanitation in various countries of the Americas.

AMRO-8, Malaria and Aedes aegypti Eradication (Caribbean)
(See page 88)

Prior to 1952 Aedes aegypti eradication had been accomplished only in French and British Guiana. (Georgetown, B.G., has since been reinfested.) The importance of the aegypti campaigns was dramatically illustrated by the occurrence of cases of urban yellow fever in Trinidad in 1954. Further studies completed in 1954 indicate that malaria continues to be one of the principal causes of physical and economic disability in the Caribbean Area, though the work of the past three years has greatly reduced the prevalence of the disease.

From 1952 to 1954 insect control programs, conducted

with the collaboration of WHO and UNICEF, were developed by the governments concerned in most of the territories in which aegypti or malaria continued to be a problem. Aegypti eradication was a principal objective from the beginning; the conversion from control to eradication of malaria was undertaken in 1955.

It is expected that the eradication of malaria will be completed by the end of 1957 in five of the seven territories where it exists at the present time, i.e., Jamaica, St. Lucia, Dominica, Grenada, and Surinam. In Dominica the problem is minimal. In St. Lucia and Grenada the endemic areas have been well delineated and are now being residually sprayed on a four-month cycle. In Surinam a similar delineation will be carried out in 1955. In Jamaica twice-yearly spraying is underway and malariometric studies are continuing in order to determine the exact prevalence and distribution of the disease. Endemic malaria in certain areas of Trinidad may continue beyond 1957 as a result of the difficulties involved in the control of Anopheles bellator. In British Guiana certain areas of the interior may continue as endemic foci beyond 1957, owing to their relative inaccessibility.

With the occurrence of yellow fever in Trinidad in 1954, several health departments have intensified their aegypti campaigns, which in all but a few territories are now operating in strict accordance with the standards of the Organization. First negativity has been or is expected to be achieved in 1955 in the following territories: St. Kitts, St. Lucia, and Grenada. First negativity is expected in 1956 in the Bahamas, Jamaica, Puerto Rico and the U.S. Virgin Islands, Antigua, Montserrat, British Virgin Islands, Dominica, St. Vincent, Barbados, Trinidad, Surinam, and the Netherlands Antilles. The year 1957 will be devoted exclusively to the final confirmation of eradication.

In 1957 provision is being made for the retention of one insect control adviser, nine sanitarians, short-term fellowships, and supplies and equipment.

AMRO-47, Yaws Eradication and Syphilis Control (Caribbean)
(See page 88)

The treponematoses are a major public health problem in many of the territories of the Caribbean Area. Yaws prevalence is high in Jamaica, St. Kitts, Guadeloupe, Martinique, Dominica, St. Lucia, St. Vincent, Grenada, and Trinidad. In St. Vincent, for example, 16.2% of the school children were found infected in a survey made in 1952. Syphilis is also endemic in all the territories of the area; as in the case of yaws, good prevalence figures are not available, but the number of cases reported treated by the local clinics is high for the limited population of the islands. In general, the size of the treponematoses problem is such that it seriously impairs the economic development of the affected areas; furthermore, it greatly exceeds the available resources to attack these diseases in an effective way. In this manner, again a disease-poverty-disease relationship has been established and can be broken only through a concentrated effort to dominate these diseases.

The different health administrations of the area are aware of the problem and have closely observed the yaws eradication program and its excellent results in Haiti. They have expressed the desire of having international collaboration to attempt to eradicate the treponematoses from their territories, adopting the same general principles used in the Haiti campaign. The program will begin in St. Kitts, Grenada, and St. Vincent and will be later extended to the remaining territories.

It is expected that this program will have as short-term effect the immediate interruption of the spreading of the treponematoses and, as long-term effect, the eradication of yaws and the control (and eventual eradication) of syphilis.

UNICEF is collaborating with equipment and supplies. Funds have already been allocated to Grenada, St. Kitts, and Nevis, and it is expected that similar assistance will be provided to other territories.

In 1957 the Organization will continue to provide the services of a medical officer and a serologist. Several short-term fellowships are also proposed.

AMRO-58, Leprosy Control (Caribbean)
(See page 88)

Leprosy is a serious problem for a number of areas of the Caribbean. There is recognition of the need for developing programs of leprosy control, by utilizing the most efficient and economic methods as part of the general development of the public health services. With the recent advent of newer drugs, it is hoped to obtain very good results by means of the ambulatory method and epidemiological surveys, making lesser use of the long and costly practice of hospitalization. The Government of Surinam requested the cooperation of the Organization in the improvement of its leprosy control program. In April 1955 the Organization appointed an expert to make a survey of the present facilities. Through the cooperation given by the Organization, it is expected that the leprosy service of Surinam can be strengthened and used for training personnel from countries where the incidence of leprosy is high. It is expected that the results of a survey of the leprosy situation in several areas of the Caribbean will be available by the end of 1955, so that control programs for those areas can be planned. Training of local personnel will be undertaken with fellowships provided in 1955.

AMRO-95, Environmental Sanitation (Caribbean)
(See page 90)

One of the major public health problems in the Caribbean Area is related to environmental sanitation. The problem can be illustrated directly from morbidity and mortality reports of diseases connected with the lack of sanitation facilities and indirectly by the prevalence of diseases such as yaws and tuberculosis, in which crowding and poor personal hygiene are important factors.

With the present attention given to malaria and aegypti eradication, tuberculosis control, and treponematoses eradication (yaws and syphilis), the deficiencies in current sanitary facilities and practices are being brought rapidly to the forefront of the problems that the health department must face.

Of the twenty-two health departments in this area, at least nineteen are interested in the collaboration of WHO and UNICEF in expanding their present efforts in this field. In 1954 the Government of St. Kitts-Nevis-Anguilla (in the Leeward Islands) requested the assistance of UNICEF and WHO in expanding the environmental sanitation program, emphasizing water supply, excreta disposal, and health education.

Early in 1955 a member of the Organization's staff visited the area and prepared the first draft of a plan of

operations.

For the provision of adequate quantities of safe water for the entire population, in certain areas, water chlorination will be all that is required. In many rural areas new wells will be needed, while in some instances hand pumps alone will satisfactorily increase the output from existing installations. Assistance will be provided also in planning for the increased production and distribution of sanitary latrines; in these activities, home owners will be encouraged to give the maximum cooperation. This phase of the program will be geared to the construction and installation of 10,800 latrines over a five-year period, or approximately 2,160 per year, with the expectation of establishing a suitable program of maintenance. In the field of health education suitable island-wide programs will be developed for schools, and increased attention (particularly to adult education) will be provided through the facilities of the health department.

Training courses for chief sanitary inspectors from health departments in the British, Dutch, and French Caribbean will be held under the supervision of PASB/WHO. Although these training courses will stress water supply, excreta disposal, and health education practices, attention also will be given to sewage and garbage disposal, food sanitation, and housing.

It is expected that this project will contribute substantially to a marked improvement in living standards and a progressive reduction in diseases attributable to deficiencies in sanitary facilities and personal hygiene practices.

A sanitary engineer, expected to arrive in 1956, will continue in 1957. Several fellowships are also provided, in addition to the 1956 training course.

AMRO-22, Training Center for Public Health Nurses and Sanitary Inspectors (See page 90)

Many of the health departments of the Caribbean suffer from a shortage of trained public health inspectors and nurses. Recognizing the importance of the responsibilities of these two categories of public health personnel, the Government of Jamaica, with the assistance of the Rockefeller Foundation, established more than 25 years ago the British West Indies Public Health Training Center.

The Government of Jamaica is interested in the further development of the Center, including, as required, revisions of the curriculum and teaching methods, expansion of the physical facilities, improved training for the staff, and better regional utilization of the facilities offered.

During 1956 the Organization will provide the services of an expert to study the existing facilities and make recommendations for the development of a modern teaching program and for a greater utilization of this center for regional training.

Fellowships for the teaching staff of the center are provided in 1956 and 1957.

Field Office (See page 90)

For text see "Zone and Field Offices", page 12.

Zone Office (See page 92)

For text see "Zone and Field Offices", page 12.

Cuba-1, *Aedes aegypti* Eradication (See page 92)

In November 1953 an agreement was signed with the Government of Cuba for the implementation of a project for the eradication of *Aedes aegypti*. This step was followed by the training of national personnel until November 1954, when the field work against *Aedes aegypti* was begun in Havana. The field operations are being progressively extended to the rest of the country, and it is expected to complete this program by December 1957.

It is proposed for 1957 to retain the insect control adviser and the sanitarian attached to the project. Some supplies and equipment are also provided.

Cuba-5, Malaria Eradication (See page 94)

Malaria constituted one of the most important public health problem in Cuba having been present throughout the island, including the municipal area of Havana. At present, after intensive work with the cooperation of the Rockefeller Foundation, there remains a limited problem in the Province of Oriente and on the north coast of Pinar del Rio, where there is an estimated population of 430,000, of whom almost 80% live in rural areas.

In order to establish a proper plan for a malaria eradication program, a preliminary epidemiological study will be conducted to determine the extent of the malarious area. The findings of the survey will make it possible to advise the Government of Cuba on the implementation of such an eradication program.

It is proposed for 1956 and 1957 to provide a medical officer and also some short-term fellowships.

Cuba-3, Public Health Services (See page 94)

The Government of Cuba desires to provide public health services throughout rural areas and to establish central health services adequate to support this expansion. The services of several professionals who have been trained in public health with the cooperation of the Organization will be fully utilized in this new project.

It is planned to organize a rural health unit, with the cooperation of UNICEF, to operate both as a demonstration service and as a training center for other health workers who will be employed elsewhere in the country. It is expected that, through travel grants and fellowships for officials in key positions in the Ministry of Health, the reorganization at the central level will be more effectively achieved, with the technical assistance of the international consultants.

During 1955 a survey of the health services and of the health needs of Cuba was conducted by national personnel, with the cooperation of a consultant of the Organization. In 1956 and 1957, it is expected that at least one rural health unit will be functioning fully, thereby promoting the health work of a community and the training of public health personnel for operations elsewhere in Cuba.

The international staff will consist of a medical officer, a sanitary engineer, and a public health nurse. Provision is also made for long-term fellowships.

Cuba-4, Nursing Education (See page 94)

There are six nursing schools attached to general and specialized hospitals in Cuba, and the Government desires to modernize the organization and curriculum to meet present needs.

A new decree modifying the current one on nursing education is being studied at the present moment and is expected to be passed in the near future. The Government is now considering the construction of a new building for the National School of Nursing to serve as a pilot project for nursing education, insofar as physical facilities are concerned, and also as a pilot activity for administration and teaching.

The purpose of this project is to cooperate with the Cuban authorities in the improvement of the curriculum as well as the organization and administration of the nursing school, through: (a) a survey to determine the nursing problems and resources; (b) the organization of a national commission on nursing education; (c) the development of courses for nursing supervisors; (d) the improvement of clinical units to serve for the training of students; and (e) the development of plans for the improvement of nursing schools in the rest of the country.

It is expected that, at the end of six years, the nursing schools will be functioning with an adequate curriculum, in accordance with modern principles of administration and professional education for nurses, which will lead to improved nursing care.

During 1956 and 1957 the Organization will provide the services of a nurse educator and a public health nurse. Provision is also made for several fellowships.

Dominican Republic-2, Malaria and *Aedes aegypti* Eradication (See page 96)

In the past, malaria constituted a major public health problem in the Dominican Republic. The Government, the Organization, and UNICEF collaborated in a program of insect control which, since its initiation in 1952, has been very successful. Through this cooperative program, more than 1,000,000 persons have been protected in the malarious areas, and the activities aimed at eradication of *Aedes aegypti* are progressing.

It is expected that this project will be continued through 1958 and reoriented in order to extend the operations to the entire country, with the final objective of eradicating both malaria and *Aedes aegypti* in the Dominican Republic.

Provision is made for retaining the malariologist and the sanitarian. Some supplies and equipment are also proposed.

Dominican Republic-52, Venereal Disease Control (See page 96)

The Organization is collaborating with the Government of the Dominican Republic in a project for the control of venereal diseases and other treponematoses. Activities were started in 1953, and the collaboration of the Organi-

zation is expected to continue through 1958. Epidemiological surveys in different areas of the country have provided information on the problem of treponematoses that will serve as the basis for field operations aimed at eradicating certain treponematoses by mass approach.

The method employed in the eradication of yaws consists in the thorough coverage of affected areas by means of house-to-house canvassing, superficial diagnosis, and treatment of all cases with 600,000 units of penicillin and of contacts with 300,000 units. Insofar as syphilis is concerned, preliminary serological surveys are being conducted and steps are being taken to reorganize the venereal disease dispensaries.

Some progress has been made in the coverage of the Provinces of Gaspar Hernandez, Moca, and Samana; it is expected that, with additional government funds, all affected areas will be covered in the next two years.

Provision is made for retaining the medical officer in 1957.

Dominican Republic-4, Reorganization of Local Health Services (See page 96)

In 1953 an agreement was signed with the Government for cooperation in the reorganization of the public health structure at the central level and the establishment of local health services throughout the country.

Steps have been taken by the Government to reorganize the structure of the national services, and the Organization has cooperated in the drafting of a sanitary code.

So far, more than ten professionals have been trained abroad and are already occupying key positions in the Ministry of Public Health. Courses for sanitarians and nursing auxiliaries have been successfully organized. The San Cristobal Unit has been constructed and equipped and is expected to be in full operation by mid-1955. Plans are being made to establish two more health units in the cities of Ciudad Trujillo and Santiago de los Caballeros in 1956.

For 1957 provision is made for retaining the medical officer, the public health engineer, and the public health nurse.

UNICEF is providing supplies and equipment.

Dominican Republic-7, Public Health Administration Fellowships (See page 98)

The Government of the Dominican Republic has requested assistance in the training of its public health personnel in connection with the general reorganization and expansion of its health services, especially in rural areas. The Organization, in another project (Dominican Republic-4, financed by PAFO, is providing technical advice to the Government in this reorganization and expansion. The project herein proposed would support the work of the Government and would supplement the assistance given through the Local Health Services project (Dominican Republic-4).

Fellowships are provided for 1955 and 1957.

Haiti-4, Malaria and *Aedes aegypti* Eradication (See page 98)

Malaria, according to surveys made several years ago,

is one of the major public health problems in Haiti, parasite and splenic indexes being high. The vector of urban yellow fever exists mostly in the coastal areas and represents a permanent threat to the susceptible population of the country, which would be exposed if the yellow fever virus were reintroduced into Haiti.

The Organization cooperated with the Government in a project for malaria control and for eradication of *Aedes aegypti*, beginning in 1953. Although the work progressed somewhat slowly at the start, it is now advancing more rapidly and is effectively being oriented toward the eradication of both malaria and *Aedes aegypti*. UNICEF has been cooperating by providing equipment and supplies.

In 1957 the international team will continue to comprise a medical officer and two sanitarians.

Haiti-1, Yaws Eradication and Syphilis Control (See page 98)

Yaws undoubtedly constituted one of the most pressing public health problems in Haiti. Although there was an almost complete lack of statistical data, it was known that the disease was highly prevalent in rural areas, with an estimated 50-70% of the population affected in some localities.

Early in 1949 the Government of Haiti requested the cooperation of the Organization in the eradication of yaws from the Republic. In 1950 the Government, the Organization, and UNICEF agreed to unite in attacking the problem through a mass eradication campaign. Activities began in July 1950 and have progressed very satisfactorily. Penicillin, in doses of 600,000 units for "cases" and of 300,000 units for "contacts", has been used. Up to October 1951, the application of the mass treatment was made by the so-called "daily-clinics" method, under which 666,738 persons were treated, 356,241 as yaws "cases" and 310,497 as "contacts". It was found that only 62.5% of the inhabitants had been treated by the clinic method, which confirmed the original thinking that a house-to-house approach was necessary for the success of the program. Consequently this method was adopted and by its use the total or almost total number of inhabitants has been covered.

Up to 31 December 1954, 3,501,450 persons have been treated, representing 97.2% of the population of the area to be covered. Of these, 1,279,564 were considered "cases" and 2,221,886, "contacts."

In order to evaluate the program and to determine the current prevalence of infectious yaws, several sample surveys have been carried out. The results of the surveys indicate that the present prevalence of symptomatic yaws in the whole country is probably around 0.5%, which shows the success of the method employed and gives a firmer basis for expecting that the disease will be eradicated from Haiti within a reasonable time.

As a further step toward the successful completion of the program, plans were made in 1954 to start a system for the early discovery of the remaining cases of yaws throughout the entire country and for the early treatment of those cases and their contacts. For this purpose the country has been divided into specific geographic areas, each of them assigned to an officer responsible for these activities.

Provision is made in 1957 for one medical officer.

Haiti-2, Local Health Services (See page 100)

The Organization has collaborated with the Government of Haiti in the development of specialized programs against communicable disease such as yaws, syphilis, and malaria, and has also cooperated in the training of a great number of public health personnel. However, the basic organization of national, local, and state health services needs to be expanded on a country-wide basis.

Beginning in 1951, a survey of a region of the country (Petit Goâve) was carried out, and recommendations were made to establish a health demonstration area with all the basic health services.

It is proposed to send in 1956 a team of international experts composed of a medical officer, a sanitary engineer, a public health nurse, and a sanitarian, to study thoroughly the national, state, and local health organization of the country and to make recommendations for the demonstration of local health services. Particular attention is to be given to rural sanitation, through the inclusion of a sanitarian in the international team and through the strengthening of sanitary inspection services by national personnel.

It is expected that a better service can be provided to the population in the demonstration area as an immediate result and that an extension of well-organized local health services throughout the country can be expected as a long-term result.

In 1957 it is proposed to retain the international team. Training of personnel started in 1954 also will continue in 1957. It is expected that UNICEF will provide some supplies and equipment.

Haiti-9, Public Health Laboratory (See page 100)

The Government of Haiti is interested in the development of well-organized public health laboratories. Since 1953, as an extension of the serological laboratory for the yaws eradication campaign, a consultant has been in Haiti and has collaborated in the conversion of a specialized laboratory into a central public health laboratory and in the establishment of regional laboratories.

Training of personnel for the bacteriological and parasitological sections of the laboratory has been accomplished. Training courses in bacteriology have been given by international technicians.

The progress of this project has not been as rapid as was expected. It is therefore necessary to continue the services of the international adviser through 1956 in order to complete the organization of an efficient system of public health laboratories in Haiti.

Haiti-10, Training of Midwives (See page 100)

Neonatal and maternal mortality rates are a major concern of the health authorities of Haiti. It is estimated that 87% of the mothers are assisted during deliveries by lay midwives. The Government of Haiti requested cooperation in training these lay midwives.

The immediate objective is to establish six training centers for lay midwives of the rural areas and gradually to extend these training courses throughout the country. Nurse midwives are to be trained abroad to serve as instructors

in these courses, and, with the cooperation of the rural health services, a system of continuous supervision of lay midwives will be established. The program was started in 1954 with the training of lay midwives in one rural health center. As they are trained, they will move to different rural health centers in order to begin the training of other lay midwives and give them continuous supervision within a maternal and child health program.

Travel grants will be provided to nationals in 1955 and 1956 for further training in public health programs for lay midwives in order to organize and direct the program in Haiti. In addition to these travel grants, the Organization will also provide in 1955 and 1956 the services of a public health nurse. UNICEF has provided some supplies and equipment.

Mexico-53, Malaria and *Aedes aegypti* Eradication (See page 102)

Malaria is one of the most important public health problems of Mexico, and yellow fever is a potential danger because of the high density of *Aedes aegypti* in all the coastal areas and valleys of the country and because of the proximity of infection now present in Central America.

The Government is developing a country-wide program, with the collaboration of the Organization and of UNICEF, for the eradication of malaria and of *Aedes aegypti* in order to extend the objectives, scope, and duration of the limited program that has been in operation in the country. This enlarged program will cover some two million square kilometers, with a total population of sixteen million living in malarious areas. It will also have an effect on the important problems caused by other arthropods susceptible to the application of residual insecticides.

The project, beginning with a residual-insecticide spraying in the southeast area and continuing westward on both coasts, will include also vaccination of the population exposed to yellow fever. Yellow fever vaccine and laboratory services for the diagnosis of the disease will be provided.

The Government of Mexico is devoting considerable effort to this program, the successful completion of which will result in the eradication of malaria and of *Aedes aegypti* in the country.

For 1957 provision is made for continuing the services of a malarialogist, an insect control adviser, a malaria eradication adviser, and two sanitarians.

Mexico-13, Venereal Disease Training Course (See page 102)

The epidemiological investigation of cases and contacts is of primary importance in the control of syphilis and other venereal diseases, inasmuch as early discovery is essential for purposes of control. It is, therefore, extremely important adequately to train lay investigators in contact-tracing and follow-up of cases. This type of training, through intensive short courses, is required not only for Mexico but for most countries in Latin America, which do not possess adequate training facilities. The purpose of this project is to train lay investigators in the techniques of contact-interviewing and follow-up of venereal disease patients.

Two short courses for Mexican nationals were conducted

ed in 1954, one attended by a fellow from the Dominican Republic. Six to eight courses are to be held in 1955, and it is expected that more candidates from other countries will attend.

A limited amount of supplies is provided for in 1955, 1956, and 1957.

Mexico-20, Virus Center (See page 102)

The National Health Administration of Mexico has considered it necessary to expand its virus-diagnosis facilities in order to obtain a better knowledge of the problem related to virus diseases of the country.

The Organization is collaborating with the Government in this program, which aims to improve the present diagnosis facilities, to give general and specialized training to professional and technical personnel in all aspects of the virus disease problem, and to integrate these activities later into the general communicable disease control service of the Ministry of Health.

The Laboratory is being organized as a part of the Central Public Health Laboratories. The assigned personnel will be given short-term fellowships in 1956 and 1957 for the study of the different phases of virus work and the production and control of biologicals. Short courses will be given by well-known virus experts to public health officers and other medical personnel. The Organization also is providing laboratory equipment not available in Mexico.

Mexico-22, Integrated Health Services (See page 104)

The purpose of this project is to develop a strong health service in one state of Mexico. This state would take the major initiative and responsibility for providing and stimulating local health services for its population.

A thorough survey of the public health problems and resources of one state of Mexico will be made by an international team composed of a public health administrator, a public health nurse, a public health engineer, and a sanitarian, accompanied by public health officers of the state, in order to present a plan for the development of a program based on the resources of the state. The international staff will then cooperate in the implementation of the project.

It is expected that, through this method, better public health services can be provided in the state and that this type of organization can be extended to other states of the country.

Provision is made for continuing the services of the international team in 1957. Fellowships also will be provided. It is expected that UNICEF will provide some supplies and equipment.

Mexico-11, Course for Nursing Instructors (See page 104)

This project was begun in 1952, and several courses have already been conducted for the purpose of continuing the training of instructors for the school of nursing and instructors working in hospitals and health centers throughout the country. The main objectives are to train nurse-instructors for teaching and for supervision of public health personnel, and to conduct a series of field training activities supplementing the theoretical teaching of the nurse-instructors.

Short-term consultants are proposed for 1956. Fellowships and supplies have been provided in the past.

Mexico-12, National University, School of Nursing (See page 104)

At the request of the Government of Mexico, this project for raising the level of the professional education of nurses and midwives in the National School of Nursing and Midwifery was started in 1954, and is planned for approximately six years.

The main objectives are to study the nursing needs of Mexico and to formulate a teaching program that will meet these needs. The curriculum to be established will integrate the social and public health aspects of nursing and will be aimed at broadening the training of nurses and midwives. The National School of Nursing and Midwifery of Mexico will become a pilot center serving as a pattern for schools in the different states of Mexico and will train the nursing faculties for those schools. The first stage of the project, namely survey and planning, is near completion, and a new curriculum will be put into effect in 1956.

Provision is made in 1957 for retaining the two nurse-educators and the public health nurse. Fellowships also will be provided.

ZONE III

Zone Office (See page 106)

For text see "Zone and Field Offices", page 12.

British Honduras-3, Public Health Administration Fellowships (See page 108)

The Director of Medical Services of British Honduras has requested assistance in the training of public health personnel and has submitted applications for several fellowships. This training will strengthen and improve the health services and will complement the technical advice given by the regular staff of the Organization.

Fellowships are provided for in 1955 and 1957.

Costa Rica-11, Poliomyelitis Rehabilitation (See page 108)

From August 1954 to May 1955, the Organization provided the services of a consultant to cooperate with the Government in a program of rehabilitation for poliomyelitis victims, following an outbreak of the disease.

Costa Rica-3, Nursing Education (See page 108)

The services of trained nurses and nursing auxiliaries are fundamental both to the operation of well-established hospitals, to provide medical care, and to field operations in public health. In Costa Rica, as in other countries of America, there is a shortage of well-trained graduate nurses and a need for additional nursing auxiliaries to assist in the care of patients in the hospitals and in the public health services.

As a means of collaborating with the country in meeting this shortage, a plan was developed and put into operation during 1952 to reorganize, strengthen, and improve the School of Nursing operated by the Government in connection with the San Juan de Dios Hospital.

There are three phases to this project: (1) to prepare a limited number of graduate nurses for nursing instruction, hospital nursing practice, and public health nursing practice; (2) to train nursing auxiliary personnel; and (3) to establish a postgraduate course of one year for nurse-midwives.

A faculty of nurse-instructors has been prepared through the fellowship program. The first class of nurses under the organized curriculum was graduated at the end of the scholastic year in 1954. Approximately forty nursing auxiliaries were graduated in December 1953 and have already been assigned to the various hospitals operated by the Government in San Jose. Two more courses for this type of worker have been started. The postgraduate course for nurse midwives was initiated in July 1954. Nurses who have been given training outside the country in advanced nursing procedures have returned and are now engaged as faculty members in the School. It is anticipated that the collaboration of the Organization will terminate during 1957, the Government taking over the whole responsibility for the project.

It is proposed to retain, through 1957, the services of four of the nurse-educators and to provide some supplies and equipment and long-term fellowships.

Costa Rica-7, Maternal and Child Health and School Health Services (See page 108)

The Government is planning to develop a program to strengthen the maternal and child and school health services that have been established within the local health activities of the country. It is expected that UNICEF will allocate funds for the necessary supplies and equipment. The Organization is providing technical advice through the permanent staff of the Zone Office.

El Salvador-5, Health Demonstration Area (See page 110)

The need for more widespread rural health services based on the modern techniques and methods of public health and allied sciences, together with the need to consider the social and economic development of the rural areas of the country, have been felt by the Government of El Salvador for some time. Following the formulation of the concept of health demonstration areas by the Second and Third World Health Assemblies, the Government of El Salvador requested that such an area be established in that country. After a survey, an area of approximately 1,800 square kilometers and a population of approximately 170,000, was chosen in the San Andres Valley, located about 40 kilometers from San Salvador. The project was started in 1951 and its basic purpose has been to develop, within the resources of the country, a public health service designed to meet the specific needs of the rural areas. It has included the integration of public health, medical care, educational, social, and economic activities, with emphasis on community development and action. The program has been designed to utilize and conserve the natural resources of the area and to promote the development of a healthy population.

With the collaboration of the Organization and of other specialized agencies of the United Nations, a plan of operations was developed by the Government to cover a period of five years. This plan provided for the building of health centers within the demonstration area and for the development of training centers and training curricula for improving the efficiency of the national personnel. The methods developed are being applied in other rural areas of the country, and persons trained within the demonstration area have been assigned to extend the rural health services to the country as a whole.

This project has already served as a demonstration of the methods and procedures of public health and preventive care services and of their practical application within the rural areas of El Salvador. The development of improved rural health practices is progressing. Within the demonstration area, new health centers, new clinics, and new rural health posts have been built and placed in operation. New water supplies have been constructed and sewage and refuse disposal facilities improved. The area has been used for the training of personnel from other countries, and it is expected that it will be used more and more for this purpose in the future.

During 1957 the staff required will include a medical officer, a sanitary engineer, and three public health nurses. Supplies and equipment and fellowships also are proposed.

El Salvador-7, School Health Services (See page 110)

The Government is planning to develop a program for improving sanitation and fundamental health services in certain rural schools. It is expected that UNICEF will

allocate funds for the necessary supplies and equipment. The program will become a part of the general health services that the country has been developing during the last few years. The Organization is providing technical advice through the permanent staff of the Zone Office.

Guatemala-11, BCG Vaccination (See page 110)

The national authorities are aware of the importance of the tuberculosis problem in the country and are desirous of making special efforts to cope with it. As part of a campaign aimed at controlling the disease, the Government wishes to undertake, with the international cooperation of the Organization and of UNICEF, a nation-wide BCG vaccination program using modern methods and techniques. It is expected that at least 500,000 persons will be reached by the campaign. After this phase is completed, BCG vaccination will continue as a regular procedure integrated within the activities of the local health services.

Guatemala-7, Public Health Administration Fellowships (See page 110)

In 1951 the Government of Guatemala requested assistance in the expansion and improvement of its health services. This request was divided into several projects, one of which was for the training of health personnel (Guatemala-7), a project that has been inactive. It is now proposed to reactivate this project. The Government has submitted applications for some fellowships and has indicated its intention to submit more. The training to be given in 1955 and 1957 under this project would complement the technical advice given by the staff of the Organization. In addition, there is in operation a project for rural public health services (Guatemala-8), financed by WHO, which would be complemented by the proposed training of health personnel.

Guatemala-8, Rural Public Health Services (See page 110)

The Government of Guatemala requested the collaboration of the Organization in planning and implementing a program to reorganize and strengthen the health facilities in the rural areas of the country. The project has been designed for the development of minimum essential health services in the rural areas. It is expected to last for a period of five years, with the Government assuming increasing responsibility for the services established.

Activities started in mid-1954. A survey was made and a plan of operations prepared, proposing the establishment of model health units, a training program for professional and sub-professional personnel, the application of modern public health practices, and the operation of a system of rural health units. It is also proposed to improve and establish water supply systems and sewage disposal facilities. UNICEF has assisted in the implementation of this program by providing supplies and equipment.

The Organization will provide technical advice in all phases of the development of this project, including the strengthening of central services necessary to support the continuation and expansion of health services throughout the country.

The international team for which provision is made in 1957 is composed of a medical officer, a sanitary engineer, and two public health nurses. Supplies and equipment, and long-term fellowships are also proposed.

Guatemala-6, Training of Auxiliary Nurses (See page 112)

A survey initiated in June 1954 indicated that there were 227 graduate nurses and 1,059 auxiliary nurses gainfully employed in Guatemala. The majority of auxiliary nurses were performing, without graduate nurse supervision, nursing functions that require great skill. Up to the present time, these auxiliary workers have received only unplanned observational training through a system which leans heavily on apprenticeship. On the basis of this survey and of expected minimum needs, it is estimated that the country would require an additional 560 graduate nurses and 1,580 trained auxiliary nurses. Recognizing the importance of the problem, the Government requested the collaboration of the Organization in developing a program to meet the shortage of nursing personnel, through the training of auxiliary nurses.

The plan of operations prepared by the Government and the Organization provides for the preparation of instructors to teach auxiliary nurses and the training of auxiliary nurses through a central training program in Guatemala City, and extension training programs in the Departments, including in-service training in institution employing untrained auxiliaries.

The project is expected to strengthen hospital nursing services in the country and to supply the additional auxiliary nurses urgently needed.

It is proposed in 1957 to retain the services of the nurse-educator. Provision is also made for some supplies and equipment and several long-term fellowships.

Honduras-5, BCG Vaccination (See page 112)

The problem of tuberculosis in Honduras is a matter of concern to the national authorities. As part of a program aimed at controlling the disease, the Government wishes to start a nation-wide BCG vaccination program, with the international cooperation of the Organization and of UNICEF. The Government will develop methods for integrating BCG vaccination in the regular health services, after the completion of the mass phase of the campaign.

It is expected that at least 400,000 persons will be tuberculin-tested and over 200,000 vaccinated with BCG.

Honduras-4, Rural Public Health Services (See page 112)

With the cooperation of UNICEF, IIAA, and the Organization, the Government has undertaken a program to provide potable water supplies and adequate sewage disposal facilities to a selected group of rural schools, to be coupled with a program for developing fundamental school health services. It is contemplated that such a program will become a part of a more extensive program for the improvement of rural health services in the country.

It is anticipated that this project will center around the training of public health personnel, both professional and auxiliary, and the development of better environmental sanitation services, with emphasis on maternal and child health in the rural areas.

Following a survey of the entire health program in the rural areas, a plan will be established for the gradual development of health units, together with the training of

the necessary professional and auxiliary personnel. The gradual development of the system will take place over a period of approximately five years, with the concomitant reorganization of the central Department of Public Health, designed to introduce the necessary administrative changes.

It is anticipated that a more effective system of local public health services will be developed in order to meet the specific needs of the country.

By 1957 it is expected that the international team will comprise a medical officer, a sanitary engineer, and two public health nurses. Some supplies and equipment and long-term fellowships are also proposed.

Nicaragua-3, Rural Public Health Services (See page 114)

This project has been planned with the Government of Nicaragua to establish training facilities for local health personnel and to reorganize and develop rural health services throughout the country.

Activities started in 1954 and are planned to last for a period of five years. A model health unit is to be used as a center for training the professional and sub-professional personnel needed in the operation of the local health services. At the same time, plans are being formulated for the reorganization of the central services necessary to support and maintain health services throughout the country.

The international team for which provision is made in 1957 is composed of a medical officer, a sanitary engineer, and two public health nurses. Some supplies and equipment and several long-term fellowships are also proposed. Additional supplies and equipment are being furnished by UNICEF.

Nicaragua-5, Nursing Education (See page 114)

As plans have been developed in the Republic of Nicaragua for increasing services in medical care and public health, the need for providing more trained nurses for hospitals and public health facilities has become apparent. A survey of the National School of Nursing in Managua in 1953 showed that a general reorganization of the School, its curriculum, and its faculty was needed if additional well-trained nurses were to be made available to the country. Following discussions with the Government, a plan of operations was developed to meet the specific needs of the School, and a formal request was made by the Government for the collaboration of the Organization.

The objectives of the project, which started early in 1955, are to establish on a permanent basis an effective program of nursing education in the National School of Nursing; to extend and improve the basic curricula of the School; to integrate the social, preventive, and community concepts of health into the nursing education; to prepare nurses from the country for teaching positions; and to improve the physical facilities of the School as regards buildings, classrooms, and laboratories. The project is planned to extend over a period of six years.

It is anticipated that more well-prepared nurses will be provided to meet the nursing needs of the country.

The provision made in 1957 is for three nurse-educators, some supplies and equipment, and long-term fellowships.

Panama-1, Rural Public Health Services (See page 116)

The Government of Panama requested the technical cooperation of the Organization in order to strengthen public health services, especially in the rural areas, and to train personnel. Accordingly, this project was established with the following objectives: to organize, develop, and coordinate public health activities in selected rural communities; to develop effective methods of public health administration based on the social, economic, and cultural needs of the people; to provide facilities in a selected rural health center for in-service training of public health personnel, including auxiliary health workers; to organize and develop the Central Laboratory in Panama City, so as to promote adequate laboratory services; and to furnish consultation to Government officials in matters related to public health administration and organization.

During the first phase, existing facilities were evaluated, priorities were set up, and a plan of operation was developed. A health unit was established as a model for demonstration in the training of personnel in other areas, and the Central Public Health Laboratory was reorganized. Fellowships for training national personnel were awarded. In-service training of professional and auxiliary personnel also took place during this phase.

The second phase, consisting of actual field work in the reorganization of the rural health services, was started in 1954 in selected communities and will be extended later throughout the whole country. A complete plan for the reorganization of the central services, for the organization of health centers, and for the training of personnel was prepared and approved by the Government. Several nationals who were given fellowships abroad are now working on the project. The Central Laboratory has been completed and equipped, and other laboratories in various health centers are being developed.

It is expected that the collaboration of the Organization will continue until 1957, when it is anticipated that the Government will assume responsibility for the services. Supplies and equipment for this project are being provided by UNICEF.

In 1956 and 1957 it is planned to retain the medical officer, the public health engineer, and two public health nurses, and also to award four fellowships and provide some supplies and equipment. Additional supplies and equipment are being furnished by UNICEF.

AMRO-7, Malaria and *Aedes aegypti* Eradication (Central America and Panama) (See page 116)

Insect-borne diseases still constitute a very important public health problem for large areas of the Central American countries and Panama and are major causes of morbidity and mortality. During the past five years this has been particularly true of malaria among infants and young children. Considerable efforts have been made by the Governments of all these countries to establish nation-wide campaigns for the control of these diseases. These activities have greatly reduced the incidence of malaria and other insect-borne infections but have by no means eliminated them as important public health problems. Although the efforts of the Governments also have been directed toward the elimination of *Aedes aegypti*, this mosquito has not yet been eradicated from the entire area, a fact that is of particular significance in view of the recent movement of yellow fever virus in the Central American countries.

A coordinated program was started in 1950 with the

advice and cooperation of the Organization, which has provided experts and fellowships for training national personnel. Equipment has been furnished by the Organization and by UNICEF to the majority of the countries, and training courses for local personnel have been held both in the individual countries and collectively for all the countries. Operations are expected to continue through 1957 and future years, until eradication of malaria and Aedes aegypti has been achieved.

Provision is made in 1957 for the retention of the two medical officers and the three sanitarians, for short-term fellowships, and for supplies and equipment.

AMRO-57, Yellow Fever Studies (See page 118)

An epizootic wave of jungle yellow fever started in Panama in 1948 and has spread northwest through Central America, having reached Honduras in 1954. Since the epidemiological conditions under which this spread has been occurring are not fully known, this project was established in cooperation with the Governments concerned and with the Gorgas Memorial Laboratory in order: (a) to obtain further information regarding the species and the seasonal density of the forest canopy mosquitoes; (b) to delimit the diffusion of yellow fever virus in Central America, by establishing viscerotomy stations and making immunity studies; (c) to ascertain the immunity state of persons dwelling near the forest; and (d) to investigate the species of monkeys serving as virus reservoirs.

The epizootic wave appeared to stall in the region of La Ceiba, Honduras, about two months before the onset of the 1954 dry season. Since this stalling, a study has been conducted to determine the conditions in this region with a view to preparation for whatever may happen after the onset of the rainy season, which is expected around May 1955. This study will deal with the following points: forest distribution of the virus and its possible pathway, advanced animal immunity surveys in selected locations, and systematic collection of ecological observations of suspected vectors.

It is expected that these studies will result in a better knowledge of the facts governing the transmission of jungle yellow fever and of the role played by the vectors that have been found to exist in Central America and southern Mexico. They will lead to the establishment of adequate measures to face the further progress of the epizootic wave, should it occur.

Provision is made in 1957 for a medical officer, an entomologist, and a sanitarian, and for supplies and equipment.

AMRO-29, Cultural Anthropology (See page 118)

It seems apparent that public health services in many areas are not realizing their full potential in solving or reducing appreciably the public health problems of

their areas. If the various countries are to adjust their health programs to meet these problems more efficiently, it is considered necessary to obtain basic cultural data on the various social groups of the area.

It is felt that a survey of this type can provide useful information regarding: geographical area corresponding to a given cultural type; relative population densities; major patterns of social organization, including political organization, family groupings, and economic organization; and specific habit patterns related to the health problems of each area.

The project, which was started in 1953 in Central America, has included the services of an anthropologist and a health educator working as a team to study the various areas. While the anthropologist has delineated culture areas and made the detailed studies described above, the health educator has studied the problems of public health education in the same area.

Preliminary surveys have been completed in Nicaragua, Panama, and Guatemala, and others are under way in El Salvador and Honduras. These surveys are expected to be completed by the end of 1955.

It is planned that the cultural anthropologist assigned to this project will apply the knowledge obtained to advise the Governments in improving public health methods in order to adapt them to the social and cultural background of the population.

For 1957 a limited amount of supplies and equipment is also proposed.

AMRO-54, Assistance to INCAP (See pages 106 and 118)

Under the Protocol of Tegucigalpa, the Institute of Nutrition of Central America and Panama was formed in 1949 as a cooperative enterprise supported jointly by the participating governments. The PASB has acted in the capacity of member of its Council and has been made responsible for its administration and supervision. A new basic statute was ratified by the Member Countries in 1954, making the Institute a permanent organization.

INCAP has carried out important field and laboratory studies on nutrition, as the basis for establishing methods and techniques that could be applied by the Member Countries to improve the nutritional conditions of their population.

The Bureau has been giving assistance to INCAP and has made available to the Institute the services of specialists, on both a long-term and a short-term basis. Members of the staff of the Bureau have been assigned to act as Director and Assistant Director of the Institute. In addition, provision is made under this project for assigning short-term consultants, for calling meetings of the Technical Advisory Committee for the purpose of evaluating the work done and advising the Director of PASB on future programs, and for calling the annual meetings of the Council.

ZONE IV

Zone Office (See page 120)

For text see "Zone and Field Offices", page 12.

Bolivia-4, Malaria Eradication (See page 122)

In spite of twenty-five years of intermittent malaria control operations, Bolivia is still afflicted with malaria. The disease was controlled in the most seriously infected areas, but moderately severe infection remained in an area containing over half a million people. Another half million live in fringe areas where infection, though moderate, is endemic and must be removed if eradication is to be achieved. In August 1954, a consultant of the Organization started to collaborate with the authorities in the planning and operation of the campaign, which must cover about 200,000 houses and 1,050,480 persons if malaria eradication is to be achieved. UNICEF has provided equipment and supplies in the past and is expected to continue its cooperation.

Provision is made in 1957 for retaining the malarialogist.

Bolivia-10, Public Health Services (See page 122)

The Government of Bolivia has been working to reorganize the Central Services of the Ministry of Health and to establish peripheral and rural services, in accordance with modern techniques of integrated health services.

In August 1953, the Minister of Health requested the Organization to provide a team of international advisers to work with the Director General of Health in evaluating and coordinating the present activities and, especially, in planning the expansion of the health services throughout the country.

The main purposes of this project are: to organize, within the Ministry of Public Health, a central office for planning and coordination; to give further assistance in the organization of the central services and the development of a full-time, adequately paid, well-trained public health career-service in Bolivia; to organize and develop rural health centers, with particular emphasis on maternal and child health; to organize a program for the training of professional and auxiliary personnel for these expanded services; and to set up a program of health education of the public.

It is expected that by the end of 1955 a survey of the present organization of the public health services in the country will be made, as a preliminary step in the implementation of the project.

It is further proposed to organize, in the rural areas of Bolivia and progressively in the whole country, a system of health centers and peripheral sub-centers, which will place particular emphasis on services to mothers and children. The health centers also will provide technical facilities for the training of professional and auxiliary personnel.

It is estimated that at least five years will be required for the successful completion of the project, at which time it is expected to have developed a well-organized central service at the Ministry level, integrated health services in various parts of the country, especially in rural

areas, as well as an adequate number of well-trained professional and auxiliary personnel.

UNICEF has provided assistance in the form of supplies and equipment, and it is expected that further assistance will be obtained in the future.

In 1957 the international team will continue to comprise a medical officer, a sanitary engineer, and a public health nurse.

Provision is also made for long-term fellowships.

Bolivia-5, Nursing Education (See page 122)

Following a study of nursing resources and needs, the Government and the Organization agreed on a cooperative project to assist the National School of Nursing, through: (a) the assignment of nursing consultants to assist in the revision of the curriculum and the expansion of field practice areas; (b) a fellowship program for both graduate and undergraduate nurses, designed to prepare quickly a nucleus of nurses to serve as instructors and supervisors; and (c) provision of limited supplies and equipment.

The first consultant, who arrived in 1953, acts as team leader and is responsible for the over-all planning. The second consultant, in nursing arts, arrived in July 1954, and the third consultant, in public health nursing instruction, arrived in January 1955. As a result of the study and of the experience gained, a new curriculum, designed to meet the needs of the country, is being prepared. Fellowships for two graduate nurses and six undergraduate nurses have been awarded.

It is hoped that, with the reorganization of the school and with the appointment of returned fellows to the faculty, a School of Nursing can be developed that will produce the leaders for the expanding nursing services.

Provision is made for the retention of the three nurse-educators and for several long-term fellowships.

Bolivia-6, Study of Water Supply (La Paz) (See page 124)

The Organization provided a short-term consultant to study the water supply problem of La Paz and prepare a report with recommendations for its improvement. The Organization also provided a limited amount of supplies and equipment, most of which were needed by the consultant in his studies. One fellowship was provided to an engineer to receive training and visit water supply systems abroad. Further assistance will be given to this project in 1956 by means of two fellowships: one in administration of water systems and the other in water treatment.

Colombia-5, Malaria and *Aedes aegypti* Eradication (See page 124)

Malaria is one of the most important health problems in Colombia. From 1 January to 30 November 1954, 67,670 cases were reported to the Ministry of Health. The malaria area has an estimated population of 7,200,000 inhabitants living in approximately 1,400,000 houses. Yellow fever is endemic in the jungle areas, and *Aedes aegypti* are present in many localities of the country. There is therefore constant risk of possible outbreaks of the urban type of the disease. With this situation in view, the Government of Colombia requested (in 1951) the assistance of the

Organization and of UNICEF for the implementation of a project for the control of both diseases, through a combined work method.

Under the program of *Aedes aegypti* eradication, house-spraying in the Caribbean Area was started in May 1952 and was followed by two other cycles of spraying, the third one having been completed in December 1954.

The annual parasitic survey of the area showed, in 1954, a great reduction in malaria prevalence. However, in areas where houses were sprayed only once in twelve months, the reduction was not so great, thereby indicating that only one house-spraying per year is insufficient to obtain good control.

The results of the *Aedes aegypti* eradication campaign, during the past four years, may be considered very satisfactory. Up to February 1955, 603 new localities were inspected and 286 were found positive. In the same period, 1,833 localities already treated were checked, and only three persistently remained positive. It is estimated that the *Aedes aegypti* eradication campaign will require four more years of work before completion.

In accordance with Resolution XLIII on malaria eradication in the Americas, approved by the XIV Pan American Sanitary Conference, the Government of Colombia is considering the development of a program, with international cooperation, for the eradication of the disease in the country. Plans are being made for a nation-wide malaria survey that will provide the basic data for the preparation of the eradication project.

The international team, in 1957, will continue to comprise a technical adviser, a malaria eradication adviser, a malariologist, and a sanitarian.

Colombia-15, Tuberculosis Control (BCG) (See page 124)

BCG vaccination was started in Medellin in 1943 with the use of imported vaccine and has been continued on a gradually increasing scale, through various governmental and private bodies, with vaccine later produced in the country. In 1952 some 90,000 persons were vaccinated with BCG.

At the end of 1953, the Government of Colombia requested the collaboration of the Organization and of UNICEF in order to initiate a nation-wide mass campaign, to be carried out with the most recent techniques, as a complement to the already existing resources for the control of tuberculosis.

It is planned to test 4,200,000 persons under 30 years of age and to vaccinate with BCG those found to be tuberculin-negative reactors. Standard tuberculin and BCG vaccine, produced by a WHO-approved laboratory and provided by UNICEF, are being used. The program is being carried out through ten especially trained field teams, whose work is preceded by an intensive health education campaign.

During the first four months of operations, the field teams were selected and trained, the standard statistical records were set up, and the educational aspect of the campaign was prepared. From 20 September to 31 December 1954, 625,392 persons were tested and 343,931 negative reactors vaccinated with BCG.

It is estimated that this project will continue through April 1956.

Colombia-52, Yellow Fever (Carlos Finlay Institute) (See page 126)

The resolution adopted by the Directing Council at its meeting in Buenos Aires in 1947 entrusted the PASB with the solution of the problem of urban yellow fever in the Continent. A program of yellow fever control was to be developed by the Bureau, which, in agreement with the interested countries, was to take the necessary measures to solve such problems as might emerge in the campaign against yellow fever. As the result of the 1947 resolution, it became increasingly important to guarantee a high standard of work in one or two yellow fever laboratories so as to serve the needs of the Hemisphere. Over the past years, a series of agreements have been negotiated with the Government of Colombia, with the aim of providing material and technical assistance to support the Carlos Finlay Institute. The last agreement, signed with the Government on 20 August 1952, established a yearly contribution of the PASB to the Institute.

The purpose of this project is to make available the facilities of the Institute to other countries in Latin America, in order to assist those countries in the control of yellow fever, by furnishing yellow fever vaccine, performing protection tests, and making pathological examinations of liver samples. A further purpose is to use the facilities of the Institute for the training of personnel from other countries and to advance studies related to other health campaigns.

The Institute has continued its activities in accordance with the above-mentioned purposes. During 1954 it distributed 547,526 doses of vaccine among several countries of the Region, in addition to the vaccine produced for use in Colombia. The Institute also has performed a great number of protection tests, as well as pathological examinations of liver samples sent from various countries.

The Organization will continue its yearly contribution to the Institute and will give technical advice through the Washington and Zone Offices.

Colombia-4, Rural Public Health Services (See page 126)

The Government is interested in the reorganization of local public health services and in the extension of existing facilities to cover the whole country. In order to accomplish this objective, it has been agreed to redescribe the cooperative project on maternal and child health already in progress for some years, in accordance with the following objectives: to reorganize and integrate the existing departmental public health services of the country, in order to bring them up to date in the modern procedures and techniques of public health work; to train the professional and auxiliary personnel of the health centers; to equip, with the assistance of UNICEF, the centers of five Departments with modern equipment and supplies; and to provide facilities and personnel for environmental sanitation, especially in rural areas. Cooperation also is envisaged at the central level, through an office of planning and coordination, which will study the organization of the Ministry of Health and its services.

The first stage of this project will be the training of the physicians, sanitary engineers, graduate and auxiliary nurses, sanitary inspectors, and statisticians already working in, or to be assigned to, the health services in each Department. Selected and strategically located health centers in each Department will be fully equipped and will

both serve the Municipality of where they are located and give technical supervision to the centers and posts in the area. It is planned to implement, in a selected area of each Department, an environmental sanitation program as a demonstration designed to promote these activities in the communities.

The program will begin with the training of personnel and the organization of the health centers in two Departments. Each year one more Department will be added, until the five Departments are organized. It is expected that the Government will ensure the extension of this program to the other Departments, beginning in 1960.

For 1957 provision is made for retaining the medical officer, the public health engineer, the public health nurse, and the nurse-educator. Fellowships are also proposed.

Ecuador-5, Tuberculosis Teaching Center (See page 126)

This program was undertaken in 1951 to improve and extend the already existing diagnostic and therapeutic facilities so as to serve the needs of an over-all tuberculosis control program; and to provide facilities for training in tuberculosis for workers from Ecuador and from other countries of the Americas.

Technical consultation was provided during the first year for the establishment of the Central Diagnostic Laboratory, for the improvement of the departments of pulmonary physiology and histopathology, and for the expansion of the BCG Campaign, of the public health visiting services, and of other field control activities.

The first course for national medical and nursing personnel was held in 1953, with a consultant of the Organization participating. The second course, held in 1954, was attended by professionals from several other Latin American countries. A similar course is to be given in 1955. It is expected that courses will continue beyond 1955 without the participation of international consultants, the Organization providing only some fellowships for non-Ecuadorian candidates. UNICEF has provided the equipment for the Center, and the Government of Ecuador is offering food and lodging for foreign students.

Ecuador-11, National Institute of Health (See page 126)

In 1952 the Government of Ecuador decided to undertake a project to improve the standards of the National Institute of Health in Guayaquil. The Institute is responsible for the control of drugs and foods imported in the country. As a service attached to the Department of Health, it produces vaccines needed in the control of communicable diseases, provides diagnostic facilities, and performs epidemiological investigations. The project was planned with the following objectives: (a) to improve the services of diagnosis and control of communicable diseases; (b) to provide means for the technical training of the staff of the Institute and to facilitate the teaching of local professionals and technicians; (c) to reorganize and set up modern standards for the food and drug control section; (d) to organize a new section for animal colonies; and (e) to improve the vaccine production section.

In 1953 the Organization provided a consultant who made a thorough study of the situation and presented a plan for the reorganization of the animal colony section. It also provided the services of a consultant to assist the Institute in several of its departments, principally the

bacteriological section and the section for preparation of culture media. Several courses for physicians, medical students, and laboratory technicians were held at the Institute, principally in general laboratory and bacteriological techniques. Early in 1955, a short-term consultant in animal colonies was provided to advise and train the personnel in the specialized techniques of this field.

It is expected that during 1955 a chemist will be made available for a period of one year, to advise in the activities related to food and drug analysis.

Ecuador-4, Rural Health Services (See page 128)

Early in 1953, the Government requested international collaboration from the Organization and from UNICEF for the following purposes: to establish a Maternal and Child Health Division within the National Department of Health to act as a service for setting the standards for and coordinating all maternal and child care activities throughout the country; to set up a system of rural centers for maternal and child care; and to organize training courses for professional and auxiliary personnel for these centers.

In May 1953 the Organization signed an agreement with the Government. As a continuation and extension of the activities so far carried out, it has been deemed appropriate, as the next step, to develop plans for strengthening and integrating the public health services of the country, including the development of a public health career service, within the limits of available budgetary resources. It is expected that a team of international advisers will collaborate in setting up an office of planning and coordination within the Office of the Director General of Health. This office will work out a plan to improve the technical and administrative machinery and to provide well-balanced health services to the population, with the resources that are available. The consultants also will assist in the expansion of existing health services and in the establishment of new centers, especially in rural areas. Courses for professional and auxiliary personnel, as well as in-service training in the existing centers, will be organized.

Provision is made in 1957 for a medical officer and a public health nurse, and for long-term fellowships.

Ecuador-16, Nursing Education (See page 128)

In Ecuador, as in many countries of Latin America, there is a great need for graduate nurses in the development of general public health activities. Aware of this problem, the Government of Ecuador has shown great interest in strengthening and expanding the School of Nursing in Guayaquil and has requested the collaboration of the Organization in this program.

The objective of this project is to improve nursing education in Ecuador by strengthening the organizational pattern of the School and by developing a curriculum designed to integrate the social and health concepts of nursing. Plans will be made for coordinating the work of the School with that of Government-supported hospitals and of the public health services.

In 1956 the Organization will provide a nurse-educator, and in 1957 a second nurse will be assigned to the project. Long-term fellowships are also proposed.

Ecuador-53, National Institute of Nutrition (See page 130)

In 1945 the Government of Ecuador created, and built special premises, for the National Institute of Nutrition. The Institute has received assistance from the W. K. Kellogg Foundation in the form of equipment and supplies and some fellowships. Since 1950 the Organization has made available the services of staff members and short-term consultants, but the Institute must continue to strengthen its corps of trained personnel in order to carry out the program as planned. It is highly desirable that the standards of this Institute be brought up to those of the Institute of Nutrition of Central America and Panama (INCAP), which has been so successful and whose activities have had such important results in Central America.

The Government has requested the collaboration of the Organization in order to improve and expand the present program, to develop continuous in-service training in the Institute, and to provide facilities for training personnel outside the country.

It is expected that the studies and work will be carried out in cooperation with the Ministry of Agriculture, with the Food and Agriculture Organization, as well as with the bilateral program of the ICA and with the Kellogg Foundation. A widespread general interest in nutrition problems has developed in the country, and there is willingness to support a sound program.

Provision is made in 1957 for retaining the medical nutritionist and for awarding long-term fellowships.

Peru-13, Public Health Demonstration and Training Center (Callao) (See page 130)

The Government of Peru requested the cooperation of the Organization in the establishment of a provincial health center in an urban area of the country, in order to demonstrate methods and techniques adapted to local conditions and at the same time to train national personnel for the other health services throughout the country. The Province of Callao was selected for this project in view of its proximity to Lima and of the conditions prevailing locally.

The project was started in 1952 with the initiation of a survey of health needs and existing resources and the preparation of a plan for the integration and further development of local health services. The plan of operations, presented and accepted early in 1953, proposed the establishment of a well-organized health unit suitable for use as a national training center. By the end of 1954, the center was in full operation, with several sections working as part of an integrated health unit. UNICEF has provided supplies and equipment.

Peru-22, Public Health Services (See page 130)

In 1954 the national health authorities, with the collaboration of the Organization, made an analysis of the health problems of the country and an evaluation of the cooperative programs developed in the past years. The study revealed the need for integrating and coordinating health services at the central level, so as to give better support to the local health units. As the result of this study, a project has been planned to assist the Government in the establishment of a planning and coordination office, attached to the Office of the Director General of Health. This office will devote particular attention to economic conditions in the country and seek means to ensure the best

utilization of the technical and financial means at the disposal of the Government.

It is expected that the first phase of the work will consist of a study of general conditions in the country describing the present organization of the local health service, as well as the characteristics of the population and their social and economic status. A careful study of the present health legislation of Peru will be necessary.

It is also expected that the reorganization of some of the local health services will be initiated, especially those considered suitable for the in-service training of personnel who are to be used in extending the work throughout the country. The previously established cooperative projects will be used for this purpose. In addition, it is expected that a health center will be organized in the mountainous area, for the purpose of training health workers for the centers located in by the Indian population.

The development of a project such as the one proposed is expected to require at least five years, and should result in modern and better-balanced health services for Peru.

Provision is made in 1957 for a medical officer, a sanitary engineer, a public health nurse, and a statistician. Provision is also made for long-term fellowships for the training of national counterparts and for some supplies and equipment. Additional supplies are expected to be furnished by UNICEF.

Peru-10, Maternal and Child Health and Related Health Services (Lima-Pativilca-Huarez) (See page 132)

In 1952 this project started field operations. A public health administrator and a public health nurse were assigned to work with their national counterparts. The national personnel, including public health nurses, were selected and appointed, and courses were initiated for the preparation of auxiliary nursing personnel. Maternal and child health clinics were organized in the principal towns of the area and in rural localities. At present, twelve such clinics are in operation. Two Peruvian sanitary engineers were appointed to the project, and a program was begun for general sanitation, including construction and maintenance of small rural water supply systems, construction of latrines, and insect control. A tuberculosis control service was organized, and a nutrition program, with milk supplied by UNICEF, was initiated. In 1953 a laboratory specialist joined the international staff as consultant, in order to assist with the organization of the laboratory in Huacho.

Supplies and equipment for the implementation of this project were provided by UNICEF.

The project is to be completed in 1955 with the provision of fellowships for nationals who will continue the work.

Venezuela-52, Venereal Diseases Laboratory (See page 132)

In 1949 the Government of Venezuela expressed interest in strengthening the venereal disease control program. One of the main problems existing at the time was the need for improving the local laboratories and standardizing the methods used in the serological diagnosis of syphilis. An agreement was signed whereby this project was established with the following objectives: (a) to study, select, and

recommend the most adequate serological techniques for use in Venezuelan laboratories; (b) to promote the standardization of all serological laboratories in the country; (c) to organize training courses for laboratory technicians from Venezuela and also from other countries; and (d) to cooperate in the study of the incidence and prevalence of venereal diseases in Venezuela.

The Organization provided the services of a consultant for four years and furnished some equipment and supplies for the Central Training Laboratory. During the first four years (until the end of 1953), 161 laboratory technicians, 45 physicians, 8 venereologists, 63 rural doctors, and 30 students of the regular course for general laboratory technicians were trained. One laboratory technician from Ecuador and one from the Dominican Republic, and two venereologists from Paraguay also received training.

In May 1955 a new consultant was appointed to collaborate in the second phase of the project, namely, the appraisal of previous work by means of a survey of the serological techniques performed in local health laboratories, and the study of plans to be implemented for a permanent national system of evaluation and standardization of serological techniques in all laboratories in Venezuela.

Venezuela-5, Onchocerciasis Investigation (See page 132)

In 1948 onchocerciasis was reported for the first time in the eastern part of Venezuela. This discovery was immediately followed by special investigations by the Venezuelan Ministry of Public Health. These revealed the presence of the infection in an area comprising three districts of the State of Monagas and one district of the State of Sucre. Of 883 persons examined during this one-year period, 217 were found to be infected, the prevalence rate being 24.6%. This is the southernmost area in the Americas in which onchocerciasis has been recognized.

The Government of Venezuela expressed interest in receiving technical cooperation from the Organization in order to make a further study of the problem, with special emphasis on the exact determination of the infected area, and to develop suitable control methods. To implement this collaboration, a short-term consultant with experience in onchocerciasis will conduct field investigations during the latter part of 1955.

Venezuela-1, Local Health Services (See page 132)

After the approval by the Second World Health Assembly of plans to organize health demonstration areas in interested countries, the Government of Venezuela requested the establishment of such a program and singled out the Tuy River Valley as one of the regions suitable for its implementation.

A WHO short-term consultant made the preliminary studies in the proposed area in March and April of 1953. The area is representative of living conditions in the interior of Venezuela.

The Government is very much interested in improving the health conditions and welfare of the people of the Valley and has requested the assistance of the Organization in the development of the health demonstration area. It is also planned to request assistance from UNICEF in the form of equipment and supplies.

The main objectives of this project are: (a) to demonstrate a unit of well-balanced rural health services,

including medical and dental care, within the resources of the community living in the Valley, this unit serving also as a national training field for public health personnel; (b) to demonstrate the application of modern methods and techniques of public health practice to a community for the prevention of diseases and the promotion of health; and (c) to demonstrate that health is the determining factor in an organized effort toward the social and economic development of an area.

The Organization will provide a team of advisers to work with their national counterparts in making a careful survey that will provide a basis for coordinating and integrating the health activities being carried out. A detailed study will also be made to establish the extent of each health problem in the area so as to further implement appropriate control services. A program of health education and of community organization will be developed as a tool for the organization and improvement of the health services.

It is expected that, with the assistance of the Organization, well-balanced health services will be provided in the Valley of Tuy and that a field training center will be developed for public health workers.

Provision is made in 1957 for continuing the services of the public health administrator, the public health engineer, and the public health nurse. Long-term fellowships are also proposed.

Venezuela-4, Public Health Administration Fellowships (See page 134)

The Government has requested assistance in the training of public health personnel, especially in the fields of insecticides and port sanitation. The fellowships proposed for 1955 and 1957 are important in the development of these special aspects of the health services of the country.

Venezuela-6, School Health Services (See page 134)

The Government is planning to develop a program for improving sanitation and fundamental health services in certain rural schools. It is expected that UNICEF will allocate funds to provide the necessary supplies and equipment. The program will be integrated in the system of general health services that has been operating in the country. The Organization is providing technical advice through the permanent staff of the Zone Office.

AMRO-74, Plague Investigation (See page 134)

For many years the Organization has been cooperating in antiplague campaigns and epidemiological studies on plague in the Western Hemisphere. During the IV Meeting of the Tripartite Border Health Committee, held in July 1953 in Arica, Chile, emphasis was placed on the importance of epidemiological studies of plague in Bolivia, where the disease has been showing a tendency to spread toward the Amazon basin. In view of this situation and upon the request of the Government of Bolivia, a project was started in August 1953 to collaborate in studies of the ecology of rodents and fleas existing in the epidemic areas of Bolivia and on the geographic distribution of the disease. These studies are well advanced.

It has been considered important to extend the program to include collaboration with Peru and Ecuador in epidemiological studies and in the development of the national plague control activities.

It is planned to continue through 1956 the services of the plague investigation expert.

AMRO-83, Typhus Control (Bolivia and Peru) (See page 134)

Epidemic typhus is a problem of considerable importance in the Andean regions of Peru and Bolivia. In 1951 the Governments of those countries, with the collaboration of the Organization and of UNICEF, began a program of periodic DDT dusting of persons, beds, and clothing in order to control rural louse-borne typhus, in the Lake Titicaca area of both countries and in the Departments of Cuzco and Arequipa, Peru. Epidemiological and laboratory studies were initiated to gain a better understanding of the epidemiology of the disease and to develop adequate methods of control. A typhus control consultant, with headquarters in Arequipa, Peru, has been assigned by the Organization since 1952.

The objectives of this project are to determine and establish adequate and economical technical standards and procedures for large-scale typhus control operations and to train professional and auxiliary personnel in the methods and techniques of typhus control.

An important part of the project is the field test of typhus vaccine carried out in collaboration with Tulane University.

The results of these activities have been gratifying. A sharp decrease in typhus morbidity and mortality rates has been observed in Arequipa and the Lake Titicaca areas, where DDT dusting was carried out.

The field test of Strain E of rickettsia vaccine has been continued, and close to 15,000 persons have been vaccinated. If the results at the end of this experiment are satisfactory, it is believed that it could provide a cheaper method for the control of the disease, thereby enabling the interested governments to organize less expensive typhus control programs.

Provision is made in 1957 for short-term consultants and for some fellowships.

ZONE V

Zone Office (See page 136)

For text see "Zone and Field Offices", page 12)

Brazil-20, Yaws Eradication (See page 136)

Yaws is an important public health problem in eleven northeastern and coastal states of Brazil, north of the city of Rio de Janeiro. According to estimates, there are around 500,000 cases in the area concerned. To date, only active cases have been treated, and no attempt has been made to control the disease by treating contacts or latent cases.

The Government is aware of the problem and desires to solve it by organizing a national campaign against yaws in an attempt to eradicate the disease, following the same general principles that have been so successfully used in the eradication program in Haiti.

It is expected that, if this program follows the same eradication methods, the short-term effect will be the immediate interruption of the spread of the disease and that the long-term effect will be eradication.

In 1957 provision is made for two medical officers and for a fellowship. It is expected that UNICEF will provide supplies and equipment for this project.

Brazil-8, Immunochemistry and Histochemistry Demonstration (See page 138)

The purpose of this project is to collaborate with the Oswaldo Cruz Institute in biological research and vaccine production, as well as to train national personnel for work in these fields in other laboratories. This will be done through: (a) assistance to the Departments of Immunology and Pathology in immunochemistry and histochemistry research; (b) the training of specialists in the same fields; and (c) assistance in research for the improvement of various antigens and vaccines.

It is expected that, as a result of the program, the Institute will be in a better position to produce its own antigens and vaccines.

One expert in immunochemistry will be required in mid-1957 for a period of approximately twelve months, to be followed by one expert in histochemistry for a period of approximately twelve months in 1958.

Brazil-17, Hydatidosis Control (See page 138)

The immediate purpose of this project is to cooperate with the Government of Brazil in the development and operation of a sound, practicable program for the control of hydatidosis, with the long-range objectives of: (a) lowering its human incidence by education of the public; and (b) minimizing it as a human health hazard by effective control in the domestic-animal reservoir.

The program will be developed along the following lines: mobile field units will be employed in selected zones to carry out an intensive campaign. Technical advice will be provided by the public health veterinarian of the Zone Office. Fellowships will be provided in 1956 and 1957 for veterinarians of the Ministry of Health who are concerned with this disease.

The result expected is a definite and constant decrease in hydatidosis in the zones selected for intensive control measures. The year-to-year status of the disease in human beings will reflect its status in domestic animals, thereby providing a useful measure for gauging the success of control efforts. The general activities of health education and improvement of slaughtering procedures are designed to halt the increase of the disease until such time as intensive control measures are economically feasible throughout the affected area.

Brazil-21, Trachoma Control (See page 138)

Information collected over a period of years by the National Health Department shows that this disease is endemic in several regions of Brazil and that its incidence is increasing and becoming a cause for concern. There are three distinct foci of trachoma in the country, situated in the interior of the States of Ceara, Sao Paulo, and Rio Grande do Sul and adjoining regions. The number of cases is estimated at 750,000, which constitutes a problem of serious economic consequences for the affected regions.

Taking advantage of the recent technical developments in the treatment and control of the disease, the Government is ready to initiate in 1957 a pilot program to delineate with more detail the extent of trachoma areas in the country, as well as to establish the basis for an economical and useful method of control to be applied in a nation-wide program.

The Organization will make available the services of a specialist, and it is expected that UNICEF will provide supplies and equipment.

Brazil-51, Yellow Fever Laboratory (See page 138)

The highly specialized nature of the techniques required for the study of yellow fever and for the production of vaccine has indicated the desirability of utilizing the existing resources and the past experience of Brazil for the preparation of vaccine to be used in the campaigns under way in other countries of the Americas. Local production in each country would not be convenient, not only because of the comparatively small amount of vaccine to be produced in each one, but also because of duplication of laboratory equipment and technical personnel.

An agreement was signed in 1950 between the Government of Brazil and the Pan American Sanitary Bureau for co-operation in a continental campaign against yellow fever. According to this agreement, the Oswaldo Cruz Institute and the National Yellow Fever Service were expected to provide trained personnel for international work, and through the PASB, pathological and serological services, as well as to supply yellow fever vaccine for use by other American countries. Thus, it has been possible to use a reliable vaccine in the yellow fever campaigns in several countries of the Americas. At the same time, it has been possible to establish the diagnosis of a number of suspected cases that occurred in countries where diagnostic facilities do not exist.

During 1954, 10,000,000 doses of vaccines were produced, approximately 8,000,000 Brazilians were immunized against yellow fever, and nearly 2,000,000 doses of vaccine were shipped to other Central and South American countries for immunization programs in those countries. Over 5,000 laboratory examinations were made for yellow fever diagnosis. Five medical officers and eight inspectors were working with the Bureau as technical advisers in programs carried out in other countries.

One yellow fever laboratory specialist is required. For the replacement of worn-out laboratory equipment and to obtain laboratory supplies and equipment not available in the country, it is estimated that \$5,000 is needed annually.

Brazil-53, Schistosomiasis (See page 140)

This has been a joint project of the Government of Brazil, the Pan American Sanitary Bureau, and the U. S. Public Health Service, for the study of the efficacy of the

newer molluscicides and the ecology of the molluscan intermediate hosts in different parts of Brazil.

From 1953 to 1955 ecological studies were made and practical field trials conducted to ascertain the chemical best suited as a molluscicide under the prevailing conditions. Fellowships were awarded to train nationals in the health education aspect of schistosomiasis control.

The Government has requested the continuation of technical advice during 1956, in order to consolidate the work done and to expand the control measures. It is expected that the U. S. Public Health Service will continue to cooperate by continuing to make available the services of a technical expert for this purpose.

Brazil-16, Public Health Administration Fellowships (See page 140)

The Government of Brazil has requested technical assistance in the training of public health personnel. In 1955 this training relates particularly to the field of hydatidosis control. This disease represents a public health problem in southern Brazil, and the Organization is very much interested in promoting its control and eventual eradication. The initial request was for a fellowship, but this may later be extended to include international experts and supplies and equipment.

This project will benefit the health services in Brazil and also will be of value in the supporting program for control and eradication of hydatidosis in the southern region of South America. In addition to its public health benefits, it also has important economic implications in that the disease causes tremendous losses annually through condemnation of meat and meat products contaminated by the parasitic cysts of this disease. It will complement the work being carried on in Uruguay and Argentina with the assistance of the Organization. Technical advice will be given initially by the regular staff of the Organization.

In 1957 it is expected to provide for the training of all types of public health personnel.

Brazil-18, National Drug Service (See page 140)

The Government of Brazil is interested in the establishment of a national service for the control of chemical and biological standards and regulation of the sale of drugs imported or manufactured in the country. Appropriate legislation for the establishment of this service has already been approved and a laboratory building is being adapted for the purpose. The collaboration of the Organization will be provided in the planning, organization, and development of this service.

It is proposed to continue through 1956 the services of the drug control specialist and to award a certain number of fellowships.

Brazil-22, Nursing Education (See page 140)

At the present time there is a great shortage of nurses throughout Brazil. It is estimated that there are less than 3,000 graduate nurses, only a small fraction of them trained in public health. It appears that the Rockefeller Foundation is interested in assisting a nursing program, once the needs as revealed by a careful survey are known.

The Ministry of Health, in cooperation with CAPES (Campanha de Aperfeiçoamento de Pessoal de Nível Superior) and the National Nursing Association, plans to make a thorough survey of the actual nursing needs of the country and has requested the collaboration of the Organization for that purpose. The Government has further proposed that the Organization collaborate in the development of the plan of operations for a nursing program based on the findings of the survey.

The results to be expected are, first, to determine the type and the number of nurses and nursing auxiliaries needed to satisfy the nursing requirements of the country and, second, to develop the training facilities of the schools of nursing so that more useful and better-coordinated nursing facilities may become available to the country.

Brazil-3, Maternal and Child Health (See page 142)

During the past years the Government of Brazil, with the collaboration of the Organization and of UNICEF, has been conducting a program for the improvement of maternity and children's institutions throughout the northeastern states of the country. The program has progressed to the point where a new plan has been developed with the aim of bringing about closer integration of the work of the Department of the Child with the facilities of the State Health Departments, the National Health Department, and the Special Public Health Service (SESP). It has also been considered necessary to expand the activities of the program to include basic rural sanitation work.

The international assistance has consisted principally of supplies provided by UNICEF. The Organization has provided, through its regular staff, technical advice in the establishment of maternal and child health services, the aim being to integrate them into the general public health activities. It is proposed to continue technical advice and to provide fellowships. It is also expected that UNICEF will continue giving substantial support to the program.

Brazil-23, School Health Services (See page 142)

The Government is planning to develop a program for improving sanitation and fundamental health services in certain rural schools. It is expected that UNICEF will allocate funds to provide the necessary supplies and equipment. The program will be integrated in the system of general health services that has been operating in the country. The Organization is providing technical advice through the permanent staff of the Zone Office.

Brazil-12, Municipal Refuse Disposal (See page 142)

The immediate objective of this program is to devise suitable methods for refuse disposal for small and medium-sized urban centers and to advise larger cities on collection and disposal practices. The long-range objective is the improvement of municipal sanitation practices in Brazil.

The program will be carried out in two phases. In 1955, the Organization will collaborate in the construction of a pilot plant to be built and operated by SESP in order to permit sanitary disposal of refuse from a small urban center. This system will then be carefully studied. The experience thus gained will be applied progressively to other communities, through the engineering program of SESP, and later to other areas not included in the SESP program,

through the collaboration of the National and State Health Departments. The second phase of the program, which will commence in 1957, will consist in furnishing technical advice on the refuse collection and disposal practices to the larger municipalities through the National Health Department.

The result of the first phase will be the development of economical methods of refuse disposal and their application to smaller communities in Brazil. The second phase will result in improved practices in the larger cities. From an over-all viewpoint, the project will improve the municipal sanitation practices throughout Brazil.

In 1955 and 1956 cooperation will be provided by the technical staff of the Zone Office. A sanitary engineer is proposed for the year 1957. One fellowship is also proposed.

Brazil-19, School of Public Health (See page 142)

Graduate education of public health personnel has a long history in Brazil, starting some twenty-five years ago with establishment of courses in public health in the National Ministry of Health and Education. In 1924, legislation was approved to organize an Institute of Hygiene at Sao Paulo. This Institute was later reorganized as a school, becoming part of the University of Sao Paulo in 1938, and it has achieved both national and international status. It cannot, however, meet all the national training needs of a country as large as Brazil.

Subsequently, with creation of the National Department of the Child, similar courses in maternal and child health and related subjects were organized and have been continued both at a training center in Rio de Janeiro and in extramural courses in the various states.

The Government has expressed interest in reorganizing and unifying the existing courses with the aim of establishing a national institute for professional education in public health. During 1954 a review of the situation was undertaken by Bureau staff, and recommendations were made for both individual and long-range steps leading to the desired ends. The necessary legislation has already been introduced in the Congress for the approval of this integration and for the provision of funds. It is expected that definitive steps will be taken, as proposed in this budget, during 1956 and 1957. The Organization is ready to cooperate in 1955 through consultations by staff members and through travel grants for faculty members under Project AMRO-18.

In 1957 the Organization will provide the services of a professor of public health as well as some fellowships.

ZONE VI

Zone Office (See page 144)

For text see "Zone and Field Offices", page 12.

Argentina-51, Malaria Eradication (See page 144)

The objective of this project is the eradication of Malaria from Argentina, as part of the continent-wide program that has been undertaken. The infested area extends

from the northern part of the country southward to the Provinces of Eva Peron, Buenos Aires, and Mendoza, including the watersheds of the Rio de la Plata and its principal tributaries. The presence of jungle fever in neighboring Zones emphasizes the danger of the spread of the virus across the border to *Aedes aegypti*-infested areas. The eradication of the mosquito in Argentina also is essential for the protection of neighboring countries where this vector has already been eradicated.

In 1953, activities were concentrated on the training of personnel. In 1954, the control and training program in the northern part of Argentina continued on a limited scale. In the latter part of the year a formal agreement for a nation-wide campaign was signed, and subsequently a plan of operations was prepared. The plan provides for work to be carried out by the Department of Malaria and Yellow Fever Control. The field operations were scheduled to commence in April 1955, to cover three of the six sections into which the infested zone has been divided.

Provision is made in 1957 for a medical officer, two sanitary inspectors, and for some supplies and equipment.

Argentina-4, Malbran Institute (See page 146)

The Malbran Institute fulfills important functions in the public health organization of Argentina. It operates as a production laboratory for many of the biological and chemical products used in the diagnosis and treatment of diseases of public health importance and serves as a center for medical and epidemiological research.

The Organization has taken steps to cooperate with the Government of Argentina in increasing the efficiency and improving the scientific standards of the Institute. It is expected that in mid-1955 a short-term consultant will make a preliminary survey and present recommendations. It is anticipated that the collaboration of the Bureau in 1956 and 1957 will consist of the services of a scientist, some supplies, and fellowships for professional training.

Argentina-7, Local Health Services (See page 146)

During 1954 the Ministry of Social Welfare and Public Health of Argentina was reorganized, and the new trends in public health administration that are envisaged for the country will affect not only the national but also the provincial institutions. As in other countries, an important problem in public health administration is the difficulty encountered in making integrated public health services available to rural areas.

The objectives of this project are to fill the public health needs of a functional unit of population in a selected area of the country and to promote the extension and reproduction of the same type of services in other areas. To achieve these objectives, an area will be selected where the public health problems of the urban and rural population are as representative as possible of the country as a whole. Cooperation will be channelled toward organizing a demonstration of integrated local health services. Training courses for local personnel will be organized, and health education and community participation will be fully used. It is expected that this type of local health services will be reproduced in other parts of the country by taking advantage of the experience and training acquired in the demonstration area.

The international staff will consist of a public health

administrator, a public health nurse, and a sanitary engineer. Provision is also made for supplies, equipment, and fellowships.

Argentina-3, Nursing Education (See page 146)

The rapidly increasing establishment of hospitals and health centers in Argentina has created a need for prepared nursing personnel.

In 1953 the Government requested the cooperation of the Organization in improving the preparation of nurses through the Advanced Technical School. A plan has been prepared with the following objectives: (a) to improve the teaching and education in the School, through the development of an experimental curriculum that would integrate the social and health aspects of nursing; and (b) to improve nursing care in health services selected as practice fields, through the organization of a modern nursing service.

The Zone Nursing Adviser has been collaborating with schools of nursing and hospital nursing services of the country, through individual and group conferences and consultative services.

Budgetary provisions include fellowships to prepare nurses for service and education positions, and limited amounts of supplies and equipment.

Argentina-5, Library, National University Medical School (See page 145)

Adequate library facilities are fundamental to successful medical education anywhere. Furthermore, in each country it is essential not only for the undergraduate schools but for continuing medical education that there be at least one library with a reasonably complete and well-organized collection for national use.

The library of the School of Medicine of the University of Buenos Aires has probably the largest collection of medical books and journals in Latin America, but its usefulness depends upon the development of specially trained library staff and the introduction of improved methods of library operation.

The Organization has taken steps to collaborate in the development of the revised methods of operation and in-service training of library staff.

It is planned to retain the services of the librarian as an adviser through 1956.

Chile-11, Cardiolipin Production Center (See page 148)

It has been recommended that a wider use of cardiolipin-lecithin antigens be encouraged in an effort toward further standardization of serology in syphilis. In Latin American countries, the wide availability of cardiolipin is limited by restrictive factors, in view of the technical difficulties encountered in large-scale production. In this connection, the Subcommittee on Serology and Laboratory Aspects, of the Expert Committee on Venereal Infections, recommended that the Organization encourage the establishment of cardiolipin-lecithin production centers to operate on a regional basis in order to fulfill the needs of groups of countries.

The main objectives of this project are to introduce

the use of cardiolipin as standard antigen for sero-diagnosis of syphilis in Chile, and to provide, at the lowest cost, the cardiolipin produced in the center to the Chilean laboratories and afterward to the laboratories of neighboring countries.

For this purpose, a fellowship is to be granted to a national in 1955 for the study of cardiolipin production. Some supplies and equipment also are to be provided for the laboratory that is being established.

Chile-14, Rabies Control (See page 148)

Assistance is being provided to Chile, as to other countries, for the establishment and conduct of a national rabies control program. The objective of the Chilean program is to eliminate this infection by initiating control procedures in Santiago, where a number of human cases have occurred, and extending the work to cover the entire country. Assistance has consisted of technical advice from the Zone Office staff and a small amount of specialized supplies and equipment. In addition, assistance is being provided in the testing of a new vaccine being developed in the Bacteriological Institute of Chile. As the initial results are encouraging, it is proposed to continue the assistance to this work, through staff of the Organization.

Chile-16, Rural Health Services (Linares) (See page 148)

The Government has initiated a project in the Province of Linares for the purpose of improving health services, with special emphasis on maternal and child health, environmental sanitation, and communicable disease control. The work will be carried out by the existing services, assisted by community participation and accompanied by a health education program. Advantage will be taken of the program for in-service training of health service personnel. UNICEF is assisting with supplies both for use in health centers and for the active environmental sanitation program, which is principally concerned with water supplies and excreta disposal. The Organization furnishes technical advice through the Zone Office.

Chile-18, Public Health Administration Fellowships (See page 148)

The Government of Chile has requested assistance in the training of its health personnel, particularly in the fields of industrial hygiene and medical care. Such training will improve the health services of the country and will support the efforts of the Government to expand health services in these two fields. Fellowships are proposed for 1955 and 1957.

Chile-19, Food and Drug Control (See page 148)

Collaboration has been requested by the Government of Chile for the reorganization and improvement of the Food and Drug Control Service of the National Ministry of Health. The Service is responsible for the administration of the laws and regulations governing the importation, manufacture and distribution of the substances concerned. Technical advice will be provided by the Zone Office. The requested cooperation includes, for 1957, specialized testing equipment not available in the country and fellowships for the training of technical personnel of the Service in various fundamental fields of the food and drug work.

Chile-20, Midwifery Education (See page 148)

Statistics indicate that 40% of the population is affected by problems in the area of maternal and child health, and recent figures show the great number of deaths due to causes related to pregnancy, delivery, and puerperium. Infant mortality data show that prematurity and congenital debility are leading causes of infant deaths. It is believed that midwives should be prepared to give care not only during delivery but also during the prenatal period, and to engage in general health education as well.

In the past few years a theoretical course in nursing has been added to the three-year program in midwifery given at the University of Chile. This program needs reorientation so as to include more public health training.

The Government of Chile has requested the collaboration of the Organization in developing a curriculum for the University School of Midwifery, and in establishing two new centers in Concepcion and Valparaiso. It is proposed that a consultant nurse-midwife be assigned to the project in 1956 for three years, that nationals be trained in principles of nursing and teaching by means of fellowships, in each of these years, and that a small amount of teaching equipment be provided.

Chile-12, Demonstration Center for Care of Prematures (See page 150)

This is a project in which the Government of Chile, WHO, and UNICEF are collaborating to: (a) lower the mortality rate among prematurely born infants through improved care; (b) establish a demonstration center and training center for professional and auxiliary personnel; (c) develop norms and procedures; and (d) integrate the service for the care of premature infants into the over-all plan for family health services.

The Organization has already awarded two fellowships for the training of national personnel. Supplies provided by UNICEF for the existing center have already been delivered. The renovated quarters for the center are nearing completion, and its official opening was tentatively planned for mid-1955. A nursing consultant assigned by the Organization to assist in the work of the center was scheduled to arrive in July 1955 for a two-year period. Additional fellowships also will be provided.

It is anticipated that, once the center has been satisfactorily established in the Calvo Mackenna Hospital in Santiago, a new center will be developed in the official hospital at Concepcion.

Paraguay-1, Malaria Eradication (See page 150)

This project revives the activity of the project that operated from November 1952 to the early part of 1954 for the eradication of *Ades aegypti*, which was accomplished in 1954, and for the control of malaria. It is now necessary to adopt a new approach to malaria eradication in Paraguay, as a part of the continental program.

The first step will be to undertake a survey, which is expected to start in October 1955, to determine the location and extent of malaria in the country. This survey will be followed by the preparation of a plan for eradication of the disease.

For this purpose, short-term consultants are required for 1955 and 1956.

Paraguay-7, BCG Vaccination (See page 150)

In December 1953 an agreement was signed between the Government, the Organization, and UNICEF, and a nation-wide BCG campaign was started in 1954, as part of the national tuberculosis control program.

Initially, the number of persons to be tested was estimated at 350,000. However, the census figures showed a much higher population, and it is now estimated that it will be necessary to test about 600,000 people.

Tuberculin testing and BCG vaccination have been performed by field teams, under a national who is director of the campaign and with the advice of international medical and nursing consultants. Up to March 1955, 326,352 persons had been tested and 174,337 vaccinated. The program was preceded and has been accompanied by intensive health education efforts and will be integrated into the general anti-tuberculosis program of the country.

Paraguay-9, Leprosy Control (See page 152)

Although complete data are not available, there is sufficient information to indicate that leprosy constitutes a great problem in Paraguay. According to local sources, the index of prevalence is very high.

In 1954 the Organization assigned a consultant to collaborate with the Government in developing a comprehensive plan for the control of the disease. The Organization also provided fellowships to local physicians for training in modern aspects of leprosy control.

As a result of the survey made, plans were developed to implement this project to reduce the incidence of leprosy in Paraguay through sterilization of sources of infection by intensive sulfone therapy. To accomplish these objectives, it is planned to undertake an intensive case-finding and treatment program throughout the country, followed by regular periodic examination of all contacts in order to detect inapparent cases while they are still in the infectious stage.

UNICEF is assisting this project by providing supplies and equipment for which funds were allocated in 1953. Additional consultant services and fellowships will be required in 1956 and 1957.

Paraguay-10, Public Health Services (See page 152)

The Organization has collaborated with the Government of Paraguay since 1950 in several fields covering major national health problems, the activities having included programs for the control of tuberculosis, venereal diseases, hookworm disease, and smallpox. As a result of these co-operative programs, considerable progress has been achieved in strengthening the health services of the country and in building up a wide appreciation of health problems on the part of the medical and related professions and the general public as well. A substantial number of doctors, engineers, and other professionals have been trained both abroad and in special courses locally.

Allocations for health programs in the national budget have increased to three times the 1950 level, and the principle

of full-time service for professionals has been established. Early in 1955, the Government reorganized the Ministry of Health to provide a more efficient and better coordinated administration. The Government also plans to start new health centers throughout the country. The continued collaboration of the Organization has been requested, but with changes in the program necessitated by the progress made in the country. The Organization will continue to give advice concerning the gradual development of the basic units in both the central and local services. The control of communicable diseases, environmental sanitation, health education, and statistics will be major activities in the health centers. Training of personnel will continue to receive high priority, and maximum use will be made of existing and potential facilities within the country.

It is expected that the Government will make the necessary budgetary provision and create positions in the national administration for the successful continuation of the program upon withdrawal of international support.

The provision for 1957 is for a team consisting of a medical officer, a maternal and child health adviser, a sanitary engineer, a medical bacteriologist, two public health nurses, and a sanitarian. Supplies and equipment and long-term fellowships are also proposed.

UNICEF has already provided some supplies and equipment and is expected to furnish additional assistance.

Paraguay-6, Department of Preventive Medicine, School of Medicine (See page 152)

From January 1953 to mid-1955, the Organization cooperated with the School of Medicine of the University of Paraguay in the establishment of a Department of Preventive Medicine to improve the teaching of this subject, to integrate that teaching in all phases of the medical curriculum and thereby contribute to the improvement of medical education as a whole. Laboratories and teaching supplies were furnished and a fellowship was awarded. The first full course on preventive medicine was given during 1953 and was repeated in 1954. Certain additional short courses for medical students and laboratory technicians were undertaken. It is anticipated that, with this cooperation, the University will be able to continue the Department of Preventive Medicine as a permanent part of the medical school.

Uruguay-51, *Aedes aegypti* Eradication (See page 154)

For several years the Organization has been collaborating with the Government of Uruguay in the *Aedes aegypti* eradication campaign. By the end of 1954, the activities had progressed so satisfactorily that the mosquito had been eradicated in the interior and only part of the city of Montevideo had yet to be freed. The remaining foci will be treated during 1955, and it is expected that verifications of the negative results will be completed before the end of 1956.

The budgetary provisions include the services of a public health sanitarian through 1956.

Uruguay-6, National Zoonosis Institute (See page 154)

The Government of Uruguay, recognizing the importance of the zoonoses as a public health problem in the country, has made preliminary plans for the conversion of the Antirabies Institute into a National Zoonosis Institute, within the Ministry of Health. The Government requested the Organization's collaboration in this project. Personnel, buildings, and equipment for the Zoonosis Institute are already available in the Antirabies Institute. Advisory services will be provided through the staff of the Zone Office. In addition, it is proposed in 1957 to provide facilities for the training of professionals and to furnish laboratory and field equipment not available in the country.

Uruguay-5, Rural Health Services (See page 154)

The purpose is to collaborate in the organization and improvement of the rural health services of the country. This end will be achieved by: (a) combining the efforts of all the institutions operating in the field of public health, under the direction of the Ministry of Public Health; (b) organizing community participation; (c) training all levels of local public health personnel; (d) providing the health centers with facilities for improving their services and for extending them to the more remote communities; and (e) creating more auxiliary units. All these activities will be supported by a wide program of health education.

This is a long-range program to be developed in stages. Five Departments of the country have been selected for the program (Paysandu, Rivera, Tacuarembó, Salto y Durazno). It is expected that the experience gained and the results obtained in this area will be used for extending the services to the rest of the country.

The agreement was signed late in 1954. Supplies provided by UNICEF began to arrive in 1955 and training activities were started. A general public health survey of the five Departments is to be completed and the first health center will be organized. It is expected that after 1957 the organization of the health center will be reproduced in other areas, until eventually the whole country will be covered.

AMRO-66, Seminar on Venereal Diseases (See page 154)

The use of antibiotics in the mass treatment of venereal diseases, together with the advances in sero-diagnosis, have recently permitted the undertaking of mass campaigns with spectacular success. This fact is illustrated in Paraguay, where, since 1953, the Government has been carrying out a control program with the collaboration of the Organization. Although the program has produced very good results, a number of problems are still unsolved, especially those related to controlling the dissemination of venereal infection through international borders.

It is believed that the holding of an inter-country seminar would be a useful means of sharing the knowledge gained, of discussing suitable measures for frontier-control, and of stimulating in all countries activities designed to free them from this group of diseases. For this purpose, it is proposed to bring together a number of venereal disease experts from the southern part of the Continent. The meeting will probably take place in Paraguay.

Requirements for this project will consist of fellowships for participants and a limited amount of supplies and equipment.

AMRO-43, Hydatidosis Control (See page 156)

This project was undertaken in 1953 in three phases: (a) a field demonstration established in Uruguay to show the effectiveness of practical field control techniques and to train national personnel in the methods of conducting a control program; (b) a grant to the Malbrán Institute in Argentina, for a study of newer chemicals and drugs in an effort to find a more efficient ovicide and an improved technique in the treatment of canines; and (c) a grant to the Parasitological Institute in Chile for a study of the influence of wildlife on the perpetuation of this disease.

During 1955 and 1956 a small amount of money was provided for additional equipment and materials for the field demonstration unit, and fellowships were awarded. In 1957 it is proposed to extend the field demonstration work to new areas and to provide fellowships for national workers engaged in hydatidosis control activities. Advisory services for this project are provided by the Zone public health veterinarian.

AMRO-84, Zoonosis Control (See page 156)

This project is proposed with the aim of cooperating with the Governments of Argentina, Chile, and Uruguay in the development of their zoonosis control programs. Technical advice to the Governments is to be provided through the public health veterinary consultant stationed in the Zone Office. In addition, it is planned to grant fellowships in 1955, 1956, and 1957 to professionals who will be engaged in programs of zoonosis control within the national health departments.

INTER-ZONEAMRO-88, Adviser on *Aedes aegypti* Eradication (See page 156)

Complying with specific instructions of its governing bodies, since 1947 the Pan American Sanitary Bureau has been devoting concentrated efforts toward eradicating *Aedes aegypti* from the Western Hemisphere. Continuous stimulation and technical advice have been given to almost every government, and a number of projects are in operation. The results of this campaign to date have been very rewarding. The elimination of the urban yellow fever vector from large areas and a great reduction in the infestation index in other areas have been accomplished. It is evident, however, that there is a need for extending this work to regions where the existence of the vector is well known and to other regions where the factors for its propagation are favorable. The threatening occurrence during 1954 of cases of jungle yellow fever in the vicinity of *Aedes aegypti*-infested areas makes completion of this program more pressing.

This project is designed to intensify and coordinate the eradication work by assisting in the preparation and execution of national programs consistent with the regional plan; by training and supervising personnel in both demonstration courses and in the field; and by developing standard procedures and providing information to assist and promote the collaboration of countries. It will provide better means for the Washington Office to coordinate and stimulate field activities connected with this very important problem.

Provision is made in 1957 for the continued services of the adviser and for a limited amount of supplies.

AMRO-90, Eradication of Malaria in the Americas (COMEP)
(See page 156)

The XIV Pan American Sanitary Conference issued an urgent mandate to the Pan American Sanitary Bureau to take all possible measures to eradicate malaria in the Americas as rapidly as possible. The Conference, considering the need to provide the Bureau with financial resources to carry out that mandate, authorized the Director of PASB to use \$100,000 of surplus funds available at the end of 1954 for this purpose, and approved an increase of \$100,000 in the total of the proposed 1956 budget above that of 1955 to continue this activity.

With the financial support given by the Conference's action, and in order to facilitate the implementation of the program, a special unit has been established within the Pan American Sanitary Bureau to provide technical advice on and coordination of the antimalaria activities that are being or will be carried on by the Organization in the Western Hemisphere. This special unit, known as the Coordination Office of the Malaria Eradication Program (COMEP), which includes five technical advisers, has been established as an inter-zone project with headquarters initially located in Mexico City.

The broad objectives of the Bureau in establishing COMEP are: (a) to develop technical standards for the malaria eradication programs in the Continent; (b) to give technical advice to governments in the planning, operation, and evaluation of malaria eradication projects; (c) to train personnel for malaria eradication activities; (d) to devise terminal procedures for assuring the successful completion of the program; and (e) to develop a system for evaluating field activities.

From the organizational point of view, the technical activities of COMEP come within the functions of the Division of Public Health. Steps have been taken to assure a proper coordination with the Zone Offices, which will maintain direct responsibilities for the operation of the malaria eradication projects within their respective geographical jurisdictions.

The development of the Bureau's collaboration in the program for the eradication of malaria has started at a low level of expenditure, but is expected to increase rapidly once the plans for individual national projects have been prepared. There is evidence of the increased interest of the Member Countries and of the international organizations in this program. UNICEF has expressed its readiness to give substantial financial cooperation for the provision of supplies and equipment, which will be required to supplement the efforts made by individual governments. It is obvious that the Bureau must be prepared to meet all possible requirements to assume fully its primary responsibility of providing technical advice, without being obligated to curtail other activities.

In the face of this situation, the Executive Committee has recommended to the Council the additional allocation of \$54,593.75 from 1954 surplus funds, recommending also that the Director be given authorization to withdraw additional funds from the Building Reserve Fund in the event that an additional financing should be necessary for the intensification of the program.

It is hoped that the VIII Meeting of the Directing

Council will take favorable action on this recommendation of the Executive Committee, since this action would be in line with the opinion of the XIV Pan American Sanitary Conference, which gave highest priority to the program of eradication of malaria on a continental basis.

AMRO-31, BCG Statistician (See page 158)

From March 1952 to April 1955, a consultant was assigned by the Organization to teach and demonstrate methods for collecting and maintaining good statistical records for the BCG campaigns and for tuberculosis control programs. The consultant collaborated in the operation of BCG vaccination projects that have been carried out by governments with the cooperation of the Organization and of UNICEF in the Region of the Americas.

AMRO-26, Brucellosis Training Course (See page 158)

Studies of brucellosis control activities in various countries, from 1950 to 1952, revealed a marked variation in diagnostic techniques, control methods, and knowledge of this disease. In an effort to promote a sound and uniform approach to control of brucellosis, a series of training courses were planned for the various national officials and technicians. The first of the series was devoted to standard diagnostic techniques, one training course being held in Santiago, Chile, in 1952 for South American countries, and the other course in Mexico City in 1954 for Central America and the Caribbean.

The second in the series of courses, planned to train professionals in field aspects of the control of brucellosis and in the diagnosis and handling of human cases, will be conducted for South American countries in 1957, and it is expected that a similar course will be held for the countries of Central America and the Caribbean in 1958. Participants at the first course are expected to include professionals from Argentina, Bolivia, Brazil, Chile, Colombia, Ecuador, Paraguay, Peru, Uruguay, and Venezuela. Participants at the second course will be professionals from British Honduras, Costa Rica, Cuba, Dominican Republic, El Salvador, Guatemala, Haiti, Honduras, Mexico, Nicaragua, Panama, Caribbean Area. Each course will be of two week's duration, with at least one epidemiologist and one epizootiologist from each country attending. The third of the series of courses will be devoted to treatment and to vaccine production.

AMRO-60, Smallpox Eradication (See page 158)

The XIII Pan American Sanitary Conference recommended to Member Governments the development of a systematic program for smallpox vaccination and revaccination in the respective territories, under the auspices of PASB, in agreement with the interested countries. In 1952 the Directing Council established a special fund of \$75,000 to be utilized in the initiation of a program of smallpox eradication. This fund was supplemented as a result of the decision taken by the XIV Pan American Sanitary Conference to allocate the 1953 PASB surplus funds, amounting to \$114,089, for this program.

The objective of the program is to stimulate and assist the countries of the Americas in the planning and development of vaccination campaigns and smallpox eradication programs, integrated in the general framework of the public health services of the countries, with the aim of obtaining the final eradication of the disease from the Western

Hemisphere.

As a first step, it was considered of the utmost importance to have available a vaccine that could withstand the difficult field conditions in many countries where facilities of transportation and refrigeration are scarce. To meet this need, technical advice and equipment have been provided to countries showing immediate active interest, and fellowships have been furnished for training the persons who will be in charge of the vaccine production. Arrangements have been made with the Serum Institute of Copenhagen for testing the dry smallpox vaccine produced by the national laboratories.

Inasmuch as many countries have required the assistance of the Organization in the planning and implementation of vaccination campaigns, consultant services have been provided, together with fellowships for the training of the national personnel working in the field.

The Bureau, through agreements signed with various governments, is furnishing essential supplies and equipment to enable laboratories in those countries to prepare potent and adequately controlled dry smallpox vaccine. Up to the end of 1954, the Bureau had furnished such equipment and supplies to Ecuador, Bolivia, Argentina, Cuba, and Chile. In addition, agreements were signed in 1954 with the Governments of Argentina, Cuba, and Chile, for the intensification of the smallpox vaccination campaigns in those countries. A similar agreement is being negotiated with Colombia.

It is expected that during the coming years similar cooperation will be extended to other interested countries.

AMRO-61, Rabies Control (See page 160)

Rabies is a disease of considerable importance because of its 100% fatality rate in human beings and its persistence in the sylvatic form, particularly in those areas where rabies may be endemic in bats and other animals and where these animals are numerous. The disease has become a matter of concern to health officials in many countries of the Americas, including Argentina, Brazil, Cuba, Dominican Republic, Ecuador, Guatemala, Mexico, Peru, Surinam, Trinidad, United States, and Venezuela. The movement of animals, both wild and domestic, makes the coordination of national and international programs and studies necessary, if effective work is to be carried out. One aspect of this project (US-Mexico) continues the work begun under a project now terminated (Mexico-4, Rabies Control).

The objectives of this project are to provide the countries concerned with technical aid and coordination in the development or improvement of national and local rabies-control programs; to coordinate these programs on an international basis; to guide and coordinate the study of the ecology of bats and their importance in the continued existence of rabies; and to offer assistance in the training of appropriate national officials for this work, including the conduct of a regional training course covering rabies control methods.

Technical advice and coordination are to be provided to the countries and areas mentioned above. It is expected that short-term advisers and demonstrators provided by U. S. Government services will assist with the training course and aid in demonstrations in the destruction of predatory wild animals that harbor and spread the disease. Small amounts will be provided each year for specialized diagnostic equipment, vaccine production materials, and teaching aids. Fellowships will be provided in 1955 and 1957 to train key

personnel for national control programs. In 1957 the international staff will consist of a rabies adviser.

AMRO-76, Vaccine Testing (See page 160)

Some of the operating projects in which the Organization cooperates are concerned with establishing facilities for the manufacture of vaccines to be used in current vaccination campaigns.

In order to help the new producing laboratories maintain the high standards in potency and safety that these vaccines require, testing services of proven quality for the control of those biological products have been obtained from the Michigan Department of Health Laboratories, to which a grant is provided.

AMRO-81, Pan American Zoonoses Center (See page 160)

The zoonoses constitute a very important public health problem, being in addition the cause of enormous economic losses. Each year the countries of the Americas report increases in these diseases in man and in animals, with little being done to control or eradicate the causative agents.

In the past, the zoonoses have not received due attention in most of the countries. Scientific knowledge is available that should be disseminated to all those concerned with the practical application of preventive control, and eradication measures. There is need for education and stimulation in the use of this newer knowledge and in applied research adapted to the existing conditions in each country or area.

The purpose of this project is to provide technical cooperation for all of the American governments by establishing a Pan American Zoonoses Center for the Americas. The Center will: (a) train personnel in the laboratory field and phases of diagnosis and control; (b) provide consultative services pertaining to the control of zoonotic diseases to any country upon request; (c) provide special diagnostic services and testing of biologicals; and (d) conduct applied research for the improvement of the techniques of diagnosis and control of these diseases.

This project was first considered after a resolution was taken by IA-ECOSOC on 21 February 1953, requesting the development of a zoonoses center within the Program of Technical Cooperation of the OAS. The Bureau, being the competent agency, considered this matter and presented this project for consideration to the 1953 Meeting of the Directing Council, which approved it, along with all other projects expected to be administered by the Bureau, as part of its activities. The project proposal was also presented through the Coordinating Committee on Technical Assistance to IA-ECOSOC, where it was formally approved under the OAS Program of Technical Cooperation, subject to availability of funds.

No financing was possible during 1954, but in January 1955, in the hope of having funds available, the COTA authorized the Bureau to take the necessary preliminary steps to determine the interest of the Member Governments in participating and to obtain offers of sites from prospective host countries. Formal replies expressing desire to participate in the services of such a Center have been received from a majority of the Member Governments, one of which, Argentina, has offered a site with adequate buildings, facilities, and local personnel.

The foregoing information has been officially communicated to CCTA and IA-ECOSOC, together with a request for allocation of funds. Should funds not be available at all or in insufficient amount, consideration may have to be given to alternate or supplementary means of financing this important project.

AMRO-91, Seminars on Application of International Sanitary Regulations (See page 160)

Seminars of one week's duration on the International Sanitary Regulations are being planned so as to create better understanding of the Regulations, explain the action taken by the Eighth World Health Assembly, and develop reporting procedures designed to carry out the Regulations and serve as the basis of national and international health programs. Directors of health and others responsible for the International Sanitary Regulations and for case reporting in Cuba, Dominican Republic, Haiti, Mexico, and the countries of Central America will be invited to participate (three per country) in a seminar to be held in Costa Rica in 1955. A second seminar for the ten countries of South America is planned for 1956 in Caracas.

AMRO-92, Poliomyelitis (See page 162)

The newly acquired knowledge of the epidemiology of poliomyelitis and the recent discoveries in laboratory methods for cultivation of the virus, diagnosis of the disease, and preparation of an effective vaccine have aroused widespread interest. The WHO has organized a world network of regional laboratories, designated as Regional Poliomyelitis Centers, for the isolation, typing, and further study of poliomyelitis virus. Owing to the limited funds available, it has been possible to establish only one regional center in the Americas.

Under this program, the Organization is to collaborate with the Member Countries in: (a) the provision of fellowships for training in modern techniques of virology; (b) the provision of fellowships for training in rehabilitation techniques; (c) the translation into Spanish of the more important scientific literature published recently on the subject; and (d) the establishment of poliomyelitis centers in different areas of the Continent.

AMRO-96, Plague Training Course (See page 162)

For many years plague has been of concern to the Bureau because of the international implications of the disease. In recent years plague has been reported from rural areas of Argentina, Bolivia, Brazil, Ecuador, Peru, the United States, and Venezuela. In each of the countries it is enzootic among wild rodents, thereby representing a constant threat to the domestic murine population and to man.

The accumulated experience of the Bureau indicates the importance of adequate training for the personnel responsible for the national antiplague services. For this reason, it is proposed to hold a training course in the newer methods of diagnosis and treatment of plague and in the most recent techniques of rat and flea destruction for the control of the disease.

The course will be held in the spring of 1957, with the collaboration of the Government of Brazil, advantage being taken of the excellent organization of the National Plague Service of that country.

AMRO-6, Joint Field Mission on Indigenous Populations (See page 162)

Approximately 20% of the people of Bolivia, Ecuador, and Peru are inhabitants of the Andes Region, where they are concentrated in the unproductive, difficult highlands and separated from their national communities. There are no 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.

The project has been designed to accelerate the natural development of the peoples of this area and to enable them to become integrated with their respective national communities and enjoy the optimum conditions of health obtainable, within the shortest time possible. The project is a joint undertaking with several agencies (ILO, FAO, and UNESCO) operating in their own fields.

A rural health center has been built and equipped to provide the necessary services, which will be expanded as transportation and personnel needs are met. The basic survey has been completed, and the services are being accepted readily by the population. The work thus far has been limited to Bolivia but is expected to be extended to Peru in 1955 with the arrival of a second public health adviser. The services of the two medical officers are expected to continue through 1957.

AMRO-10, Inter-American Center of Biostatistics (See page 162)

This Center was established for the purpose of improving vital and health statistics of Latin American countries, by means of training technical personnel of the various statistical services. The principal objectives are to develop for Latin America a long-term training center on vital and health statistics, with teaching conducted in Spanish, and at the same time to develop a high level of efficiency and scientific standards in the government offices in Chile concerned with the various aspects of vital and health statistics, so that they may serve as model offices for demonstration.

The Center has been operating under an agreement signed in August 1952 by the Government of Chile, the World Health Organization, and the United Nations. The faculty of the School of Public Health of the University of Chile participates in the program and, beginning in 1955, will have greater responsibility for the administration and teaching of the courses. The staff and facilities of various national and local governmental statistical offices in Chile are made available for the field training program. The annual training course consists of six months of academic studies and three months of field training. The first class at the Inter-American Biostatistical Center completed the nine months' course on 27 November 1953, thirty-one fellows from fifteen countries having attended. In 1954 twenty-seven fellows were matriculated from fifteen countries. Eighteen countries have been represented in the student body of the ICS during the two years.

The international experts participate both as professors in the academic phases of the program and as consultants to the Government for the development of statistical services. Fellowship grants are provided for students from Latin American countries. In addition to fellowships given by other agencies, probably between ten and fifteen fellowship grants will be required for each year from the Organization.

The budgetary provision in 1957 is for an expert in hospital statistics, several long-term fellowships, and assistance to the local institutions in expanding their staff and facilities to provide instruction for technical personnel from other countries.

AMRO-45, Laboratory Biological Facilities (See page 164)

The national public health laboratories of many countries are seriously handicapped in their work by the inadequacy of animal colonies and other facilities. Many of the existent colonies are not properly housed, established, or kept. Reproduction rates are low, and diseases often kill off the animals faster than they can be replaced. Disease in the colonies is so prevalent that at post-mortem it is sometimes impossible to determine if the pathology is due to the experimental inoculations or to disease conditions contracted in the animal colony.

The purpose of this project is to supply technical advice for the improvement of public health laboratory facilities through specialists assigned on a short-term basis, to about three different countries each year. The specialists would survey the existing conditions and make recommendations for remedial action and the establishment of reliable biological facilities. Attention would be given also to the techniques for study of laboratory-animal diseases and to the services of the laboratory regarding diagnostic of zoonotic diseases. Provision is also made to permit shipment of cultures, strains, antigens and other biologicals, as requested by the various national laboratories. Fellowships are also proposed.

AMRO-85, Latin American Center for Classification of Diseases (See page 164)

In collaboration with the Government of Venezuela, a Center has been established for instruction on and interpretation of the International Statistical Classification of Diseases, for the Spanish-speaking countries of the Americas. The purposes of the Center are to serve as a clearinghouse for problems arising in the application of the Spanish edition of the Manual of International Classification of Diseases and Causes of Death; to collect and preserve experience and suggestions of value for subsequent revisions of the Classification; and to check the coding of samples submitted by countries in order to insure comparable coding procedures. The Center also is expected to provide short courses offering detailed instruction in statistical coding to nationals responsible for this work in their respective countries.

It is hoped that this Center will contribute to the improvement of comparable mortality and morbidity statistics in the Americas.

The budgetary estimates include provision for fifteen short-term fellowships each year, together with a small amount for supplies and equipment to supplement the operations of the Center.

AMRO-86, Health Statisticians (See page 164)

In order to furnish countries with more effective consultant services in health statistics, provision has been made for advisers with the following functions: (a) to give advice to countries for the improvement of vital and health statistics, with special emphasis on notifiable-disease statistics, on the development of health statistics in accord-

ance with recommended standards, and on the uses of the data in program planning; (b) to render assistance in the selection and follow-up of fellowships students and in the development of seminars, workshops, and other training in statistics; and (c) to provide advice on statistical phases of Bureau projects and assist in the compilation and analysis of information in the countries for program planning.

Budgetary provisions contemplate the assignment of an adviser from 1955 to serve Cuba, the Dominican Republic, Haiti, Mexico, and the countries of Central America and Panama, and a second adviser from 1956 to serve the countries of South America.

Field Office - El Paso (See page 164)

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, has been established to collaborate with local health authorities on both sides of the border in the solution of common health problems. It is an inter-zonal program whose functions 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, promoting and assisting in the development and operations 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.

AMRO-23,4, Fourth Regional Nursing Congress (See page 166)

Since 1949 three 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. The Government of Mexico has extended an invitation to have the Fourth Congress meet in Mexico City in September 1956.

Budgetary provision is made for conference services and for a limited amount of supplies and equipment.

AMRO-28, Advanced Nursing Education (See page 166)

Before 1954, plans were discussed with the Government of Chile for the development of two nursing programs, one being a course for the preparation of graduate nurses for administrative, teaching, and supervisory positions in hospitals and public health services. The objective of the second project was to prepare graduate nurses from the Latin American countries as instructors in acute and chronic communicable diseases. It was hoped that this prepared personnel would return to their respective countries as teachers in the schools of nursing and as head nurses in communicable disease services in hospitals or in the epidemiological services of the health departments.

These two projects have been combined in an agreement signed in October 1954 between the Government and the Organization, for the development of a course of administration

in nursing. Activities started in January 1955. To date, the Organization has awarded fellowships to nurses from El Salvador, Ecuador, Venezuela, Peru, Paraguay, and Uruguay. Consultative advice for the development of the course has been provided by the Zone Nursing Adviser, and supplies and reference materials in nursing education have been furnished.

It is anticipated that nurses from other Latin American countries to whom fellowships will be awarded will, on their return, be given positions of responsibility in teaching, supervision, and administration, so as to help strengthen nursing, specifically in the area of their clinical specialty. In this manner it is hoped that the general health services given to the public will be improved.

Provision is made in 1956 and 1957 for the services of a full-time adviser in teaching and administration, and for supplies, equipment, and fellowships.

AMRO-46, Workshop on Nursing Education (See page 166)

As part of a continued effort to stimulate interest and improve the training of nursing personnel, four workshops have been held to date. In three the discussions centered around teaching methods (Santiago, 1950; Guatemala, 1951; and Lima, 1952), while the fourth (Mexico, 1954) took up the question of developing educational programs in nursing to meet the needs of a specific country.

In 1957 it is planned to hold a similar workshop for several of the countries in South America (Argentina, Bolivia, Brazil, Colombia, Chile, Ecuador, Paraguay, Peru, Uruguay). Another meeting on this topic is planned for a future year for countries of Central America and the Caribbean, with the participation of national health agencies in the various countries. In 1957 approximately fifteen nurse-educators will be invited to attend, and the staff will be made up of several consultants from various fields, including a specialist in workshop procedures.

AMRO-93, Health Education (See page 166)

In order to give more effective consultant services in health education, provision has been made for two consultants to be stationed in the field. One will be based in Mexico City from mid-1955 and will serve Mexico, countries of Central America and Panama, and the Caribbean area; the other will be stationed in Lima, beginning 1956, to serve the countries of South America.

These consultants will: (a) study the situation to determine the needs of the various countries; (b) advise on the best ways of assisting the countries to meet their problems; (c) assist in imparting knowledge of this discipline to other workers of the public health team - professional, subprofessional, and auxiliary; and (d) assist in the selection and training of national health educators.

AMRO-94, Control of Diarrheal Diseases in Childhood (See page 166)

Diarrheal diseases are the major cause of morbidity and mortality in the majority of the countries of the Americas. There are a number of specific measures, based on recently acquired knowledge of the mechanics of the spread of diarrheal diseases, that can now be successfully introduced in preventive and medical-care programs and will help to improve more rapidly the present situation in regard to diarrheal diseases in childhood. It is important

that this knowledge be disseminated as widely as possible to professionals directly concerned with the problem.

A series of inter-country seminars designed to impart presently available knowledge has been planned for 1956 and 1957. These seminars will bring together from each of the various countries a multi-professional team including maternal and child health officers, officers in charge of the control of communicable diseases, professors of pediatrics, public health nurses, laboratory directors, sanitary engineers, and health educators.

These seminars are expected to result in a reorientation of the various aspects of the public health and medical care programs of the countries, thereby making it possible to achieve more effectively and more rapidly a reduction in the diarrheal-disease problem.

AMRO-9.2, Seminar on Mental Health (See page 168)

Activities in mental health have included attendance by a number of delegates from the Americas at the Chichester Conference on Mental Health and Child Development in 1952, and a seminar on alcoholism held in Buenos Aires in May 1953 and attended by over thirty participants from five South American countries. Interest has been shown by a number of official agencies and voluntary associations in the general field of mental health. A short-term consultant visited several countries during the latter part of 1953 and during 1954, as preliminary preparation for the holding of a seminar on mental health in Montevideo in mid-1955.

AMRO-1, Environmental Sanitation Training (Brazil, Chile and Mexico) (See page 168)

Lack of adequate sanitation facilities is recognized as one of the principal factors limiting the development of a sound public health program in Latin America.

The object of this project is to train sanitary engineers and auxiliary personnel to form a nucleus of leading public health workers who will staff and strengthen both national and local health departments. Cooperation will be given to the Schools of Public Health in Brazil, Chile, and Mexico in order to strengthen these courses and expand facilities for training environmental sanitation personnel from all countries in the Americas. On returning to their own countries, the trainees will carry out sanitation programs and give in-service training to their co-workers.

The School of Sao Paulo offers a course for sanitary engineers lasting eleven months, including two months of field training, and is completing plans for a full year course for sanitary inspectors that is expected to commence in 1956. The School in Chile now has a five-month course for sanitary inspectors and is planning a specialized course for sanitary engineers that is expected to be operating at full strength by 1957.

To date, 17 sanitary engineers and 30 sanitary inspectors have been trained, from nearly all the Latin American countries. These figures include 7 fellows now taking the sanitary engineering course. It is anticipated that from 10 to 15 awards will be made for the sanitary inspectors' course each year.

Provision is made in 1957 for supplies and equipment

and for fifteen fellowships.

AMRO-17, Waterworks Training Course (See page 168)

Adequate production of potable water is of extreme importance in eliminating water-borne diseases that are prevalent in large areas of the Americas. Proper use of existing systems is of great economic importance. During the period since 1942, many governments, often in cooperation with the IIAA, have constructed numerous new water systems and improved existing systems, at a cost of millions of dollars.

The purpose of this project is to train water plant operators in the ways and means of better operating existing plants, improving water quality, and maintaining plant equipment. A course was held in 1953 for Panama and Central American countries, and a second one will be held in 1955 for the same countries.

It is proposed that similar courses be held in suitable locations, with laboratory and training facilities, to serve other countries in the Continent.

Provision is made in 1957 for consultant services, thirty fellowships, and some supplies and equipment.

AMRO-50, Fluoridation of Water (See page 168)

Fluoridation of water supplies is now being accepted as an effective and economical method of preventing dental decay. Many governments are interested in this program and have requested information on this matter.

This project includes assistance in establishing demonstration pilot plants in suitable places, where water supply and public health engineering personnel can visit and make use of the analytical facilities in connection with studies of water supplies that naturally contain fluorine. The immediate objective is to demonstrate to water supply and health service engineers of the Latin American countries economical and safe methods for fluoridation. The long-range purpose is to promote sound fluoridation practice in all places where this treatment is needed.

The assistance required could consist of a consultant, a small amount of laboratory supplies and equipment, and travel grants for visits to the demonstration installations.

AMRO-62, Housing Sanitation (See page 168)

In June 1952 the Pan American Union, in collaboration with the National University and the "Instituto de Credito Territorial" of Colombia, created the first Inter-American Center for the study of the housing problem. This Center trains personnel from all the American countries and from other parts of the world, in the different aspects of housing. Environmental sanitation is a part of the basic training program, and the Center has asked for and received the collaboration of the Organization in this field. During 1953, 1954, and 1955, the Organization's assistance consisted in providing the services of a sanitary engineer who, during three to four weeks of each year, gave to the students of the Center a series of lectures and demonstrations on sanitary engineering problems related to housing. This

help is not considered sufficient, and it is deemed necessary to expand it in future years as a means of stimulating needed coordination between national-housing and health activities.

It is proposed to provide consultant services to assist the Center in expanding instruction in the sanitation aspects of housing, in serving additional housing and health personnel of the national services through one or more one-month seminar-workshops, in undertaking appropriate research projects, and in disseminating information in this field.

In addition to the consultants' services, fellowships and a limited amount of supplies are proposed for 1957.

AMRO-64, Seminar on Sanitary Engineering (See page 170)

In order to promote and strengthen the interest of professionals in the field of public health engineering, it is important for leading sanitation workers of the various countries to meet from time to time to exchange information regarding current practices and discuss common problems. Experience has shown that this objective can successfully be accomplished through the holding of seminars devoted to particular aspects of sanitary engineering.

Seminars of this kind have taken place in Managua, Nicaragua (1952), and in Caracas, Venezuela (1954). A third one is to be held in San Juan, Puerto Rico, at the end of 1955 for participants from Cuba, Dominican Republic, Haiti, Mexico, and the Caribbean.

These meetings have proved to be most effective in promoting inter-American cooperation in the field of sanitation and in furthering the study of the ways of improving the present status of public health engineering in the various countries and of integrating their activities in the general health program.

It is proposed that, in 1956 and 1957, seminars be held for countries of South America.

AMRO-97, Seminars on Training of Sanitary Inspectors
(See page 170)

All the Member Countries are showing increasing interest in the training of sanitary inspectors, whose work is essential for the adequate operation of local public health services.

It is proposed to hold two regional seminars during 1957, for national personnel directly responsible for the training of sanitary inspectors. One of these seminars would be held in El Salvador to serve North and Central America and the Caribbean. The other would be held in South America, for the other countries of the Americas.

The objectives of these seminars would be: (a) to review the present situation concerning training programs in the different countries; (b) to establish a logical basis on which the countries can determine their present and future needs; (c) to discuss the type and amount of academic, field, and in-service training needed by sanitary inspectors at different levels; and (d) to make recommendations based on these reviews and discussions, concerning the type, duration, and content of the training, qualifications for admission, instructors, training facilities, and other pertinent matters.

The Organization would provide in 1957 fellowships, some secretarial service, and a small amount of supplies and equipment, as well as the services of consultants.

AMRO-18, Medical and Public Health Education (See page 170)

The need for improving medical and public health education in Latin America has become evident in a number of studies made recently and has led the governing bodies of the Organization to adopt specific directives calling for the concentration of efforts on the training of personnel. Cooperation is being extended to schools of medicine and of public health and is to be continued in the future in various forms: services of short-term consultants; provision of visiting professors; fellowships to teaching personnel for further training in universities in the Americas and in other countries; travel grants to deans and senior members of the faculties for observation of teaching methods and discussions of curriculum planning, and demonstration programs.

Under this project, 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 the health organization and general conditions of those countries. 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. Another expanding phase of this program is the strengthening of instruction in preventive medicine for undergraduate medical students, as a means of influencing the fundamental organization of medical education.

This long-range project, closely related with numerous activities of the Organization in many countries, also is coordinated with the activities of a number of nongovernmental and bilateral international agencies in the development of professional education. The Medical Education Information Center (operated by the Organization) has been specially set up by agencies interested in medical education and training of health personnel, for the exchange of information and the coordination of such activities.

It is expected that the strengthening of schools of medicine and of public health will have a deep and lasting impact on medical care and public health programs in the various countries.

The budgetary provision in 1957 is for consultant services for several months, fifteen fellowships, and some supplies and equipment.

AMRO-35, Fellowships (unspecified) (See page 170)

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 urgent health services.

Great importance, however, has been attached by the governing bodies to providing facilities for the training of basic public health personnel and of specialists most needed for the development of certain public health programs. With funds so provided, forty awards were made in 1953 and forty-seven in 1954, in a wide variety of subjects,

for the training of personnel from most of the countries of the Continent. A similar program is being carried out in 1955 and others are planned for 1956 and 1957.

AMRO-48, Seminar on Teaching of Public Health in Schools of Veterinary Medicine (See page 170)

The increased attention being given by the Ministries of Health to the problems of zoonoses has created a demand for the full-time services of public health veterinarians. In order to promote and strengthen the interest of professionals and their training in this field, it is important to bring together the deans of schools of veterinary medicine to discuss suitable ways of incorporating present-day teaching of preventive medicine into future curricula. During 1957, it is proposed to hold a one-week regional seminar for deans of schools of veterinary medicine of Latin America, with participants from the twenty-three schools located in Argentina, Bolivia, Brazil, Colombia, Chile, Cuba, Ecuador, Mexico, Peru, Uruguay, and Venezuela.

The budgetary provisions include, in addition to the participants, several consultant-months and a limited amount of supplies.

AMRO-49, Seminar on Teaching of Preventive Medicine (See page 170)

Increased recognition of the role played by the individual physician in prevention, whether he be actively engaged in public health work or in private practice, has brought about realization of the inadequacy of present-day teaching of preventive medicine in many medical schools throughout the world. This difficulty is aggravated by uncertainty as to which phases of instruction should be emphasized for undergraduate medical students. Greater attention has been paid in recent years to the understanding of human beings and to the sociological implications of medical practice, as well as to the still more important traditional aspects of communicable-disease prevention.

As a result of the highly successful results obtained in the seminars of professors of preventive medicine held in North America and in Europe, plans were made to hold two such seminars, on a regional basis, the first late in 1955 for eight countries of South America, and the second in 1956 for the remaining Latin American countries. Preparatory work was started in 1953, through contacts with deans and professors of preventive medicine in all the sixty-four schools, mainly to select the best time and place for the first seminar. Further groundwork was done in 1954 and early 1955, through accumulation of the necessary information and through visits by a consultant to most of the medical schools that will participate in the seminar.

The objectives of the seminars is to provide for an exchange of ideas as to the content of the course in preventive medicine, the time at which it is to be given, the methods of instruction to be used, the relationships with other departments of the medical school, and the utilization of community resources for instruction.

Provision is made in 1956 for several consultant months, supplies and equipment, and fifty participants.

AMRO-67, Veterinary Medicine Education (See page 172)

Increasing interest in the problem of zoonoses in

in public health has led to the extension of the veterinary public health activities of the Organization. For the most part, inadequate attention is being given to preventive aspects in the schools of veterinary medicine. This project is designed to strengthen the teaching of epidemic-epizootic and veterinary hygiene in the schools of the Americas, through the provision of short-term consultants in 1955 and 1957 and fellowships in 1955.

AMRO-68, Survey of Pediatric Education (See page 172)

Basic to any program concerned with the health of children is the education of the physicians who are responsible for their care, including both general practitioners and specialists. The study made by the American Academy of Pediatrics, to evaluate the amount and quality of training given to those physicians, proved to be most useful in advancing and improving pediatric education. On the basis of that experience, plans were made for a similar study of the medical schools, hospitals, clinics, and laboratories in Latin American countries where the training is given to physicians in the care of children. The study is being conducted in 1955, through a consultant who planned the survey, visited the various countries, and will analyze the information obtained.

It is expected that weak spots can be strengthened and the desired goals reached by all or the majority of the schools, by producing physicians fully trained to promote the health of children and to offer them the best of medical care in sickness.

AMRO-75, Statistical Education (See page 172)

The purpose of this project is to assist in the development of professional statistical education in the Americas and to provide graduate education for statisticians. Efforts will be directed to the creation of a statistical profession in which qualifications include a university education and at least one year of specialized education in health statistics. To achieve this goal, it will be necessary to provide for the undergraduate university preparation of students through elementary courses in statistics in the various countries, and also for a graduate center or center specializing in health statistics (in which a degree comparable to that of Master of Science is awarded). The project provides, in 1957, for the award of fellowships to university faculty for graduate education in statistics, for short-term consultants, for strengthening the teaching of statistics in schools of public health, and for equipment and supplies for the improvement of instruction.

AMRO-77, Pan American Foot-and-Mouth Disease Center (See page 172)

The Pan American Foot-and-Mouth Disease Center was established under the Technical Cooperation Program of the Organization of American States, with the Bureau serving as the operating agency. The Center was set up near Rio de Janeiro, Brazil, to make possible a continent-wide attack against this disease and to provide needed services not available at the national level in most countries. These services include: (a) a training program for personnel in the laboratory and field phases of diagnosis and control as related to conditions in individual countries; (b) a diagnostic service to provide proper services to those countries

that have not been able to establish a reliable laboratory of their own, and a confirmatory service for those already doing their own work; (c) consultative service to advise countries on the practical application of prevention, control, and eradication programs, including coordination of activities with other countries (in this service, consultants are available for field visits upon request); and (d) basic research to complement training and to improve the means of effective control and eradication.

During the last years, the facilities and services of the Center have been established and five training courses of two months each have been conducted. Steps have been taken that will allow the Center to establish a pilot plant for the production of vaccine, based on the improvements gained through the research work. It is anticipated that this Center will reach its maximum level of operation in the near future and that all services originally planned will be available to the participating countries.

PART III

SECTION 3 - Publications of the PASB (See page 174)

The BULLETIN will be published on a monthly basis as in the past, and the estimates submitted are based on the experience of previous years. This publication is a major means of disseminating information regarding developments in public health.

The weekly and quarterly epidemiological reports will continue in accordance with the provisions of the Pan American Sanitary Code; the amounts estimated are based on previous years' experience.

The items for special publication reflect increased activity during 1955. Among the material to be published in this year are the Spanish and Portuguese versions of the eighth edition of "The Control of Communicable Diseases in Man", issued by the American Public Health Association in January 1955; a report on the Yellow Fever Conference, held in Washington, D. C., in December 1954, under the auspices of the PASB; the fifth report on the Status of the Anti-Malaria Campaign in the Americas, presented to the XIV Pan American Sanitary Conference; and a report on the public health conditions in the Americas, based on the reports presented by the countries to the XIV Pan American Sanitary Conference, and on additional information submitted by Member Governments. Other publications issued in 1955 include the Spanish version of the Monograph Series No. 7 of WHO, "The Cost of Sickness and the Price of Health".

The usual provision for publication of the AIDIS Journal is continued.

SCHEDULES

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						SUMMARY	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$		
14	14	14	134,149	169,477	140,038	3	3	3	25,500	41,829	26,827	PART I PAN AMERICAN SANITARY ORGANIZATION	
121	120	122	911,509	927,055	949,999	51	51	51	491,622	506,502	516,008	PART II PAN AMERICAN SANITARY BUREAU - HEADQUARTERS	
111	119	113	1,054,342	1,103,468	1,109,963	31	39	37	614,364	633,034	761,576	PART III PAN AMERICAN SANITARY BUREAU - FIELD AND OTHER PROGRAMS	
246	253	249	2,100,000	2,200,000	2,200,000	85	93	91	1,131,486	1,181,365	1,304,411	TOTAL - ALL PARTS	
				100,000	100,000							LESS MISCELLANEOUS INCOME	
				2,100,000	2,100,000							TOTAL FOR ASSESSMENT	
14	14	14	71,414	73,878	76,349	3	3	3	15,290	15,880	16,404	PART I PAN AMERICAN SANITARY ORGANIZATION	
												Sect. 1. <u>Conference Services</u>	
												Sect. 2. <u>Organizational Meetings</u>	
			20,489	49,962	20,489				7,111	18,865	7,111	Ch. 1. Meetings of the Directing Council, Executive Com- mittee and WHO Regional Committee	
			19,000	19,000	19,000							Ch. 2. Meetings of the Executive Committee	
			39,489	68,962	39,489				7,111	18,865	7,111		
			1,800	1,800	1,600				200	200	200	Sect. 3. <u>Common Staff Costs</u>	
			1,194	1,312	780				200	200	200	Ch. 1. Dependents' Allowance	
			9,461	9,789	10,118				2,033	2,111	2,182	Ch. 2. Repatriation Grant	
			676	700	724				146	152	156	Ch. 3. Pension Fund	
			1,700	4,200	1,700					3,875		Ch. 4. Staff Insurance	
			8,415	8,836	9,278				520	546	574	Ch. 5. Home Leave Travel	
												Ch. 6. Recruitment Travel	
												Ch. 7. Reimbursement of Income Tax	
			23,246	26,637	24,200				3,099	7,084	3,312		
14	14	14	134,149	169,477	140,038	3	3	3	25,500	41,829	26,827	TOTAL - PART I	
12	12	12	90,130	92,692	93,421	1	1	1	33,896	34,175	34,475	PART II PAN AMERICAN SANITARY BUREAU - HEADQUARTERS	
2	2	2	15,420	15,690	15,960	2	2	2	49,085	49,345	49,560	Sect. 1. <u>Executive Offices</u>	
1	1	1	6,235	6,450	6,665	4	4	4	21,936	22,431	22,926	Ch. 1. Office of the Director	
6	6	6	30,142	31,049	31,773	1	1	1	5,375	5,375	5,375	Ch. 2. Office of Public Information	
11	11	11	51,198	53,037	54,876	1	1	1	5,572	5,787	6,002	Ch. 3. Office of Coordination	
												Ch. 4. Library	
												Ch. 5. Editorial Office	
32	32	32	193,125	198,918	202,695	9	9	9	115,864	117,113	118,338		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						SUMMARY	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$		
2	2	2	13,250	13,540	13,710	2	2	2	26,572	27,091	27,540	Sect. 2. <u>Division of Education and Training</u> Ch. 1. Office of the Chief Ch. 2. Fellowships Branch Ch. 3. Professional Education Branch	
4	4	4	21,258	21,942	22,544	5	5	5	25,809	26,766	27,544		
5	5	5	28,438	29,396	30,248	1	1	1	7,848	8,089	8,331		
11	11	11	62,946	64,878	66,502	8	8	8	60,229	61,946	63,415		
												Sect. 3. <u>Division of Administration</u> Ch. 1. Office of the Chief Ch. 2. Supply Office Ch. 3. Administrative Management and Personnel Branch Ch. 4. Budget and Finance Branch Ch. 5. General Services Office	
2	2	2	21,729	22,032	22,479				1,300	1,300	1,300		
9	8	8	45,546	39,592	40,617	4	4	4	14,269	15,192	15,832		
6	6	6	28,593	30,311	31,446	4	4	4	20,760	21,631	22,296		
14	14	14	65,127	68,250	70,729	8	8	8	37,392	38,924	40,403	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	
26	26	26	101,542	104,917	108,173	6	6	6	24,384	25,414	26,444		
57	56	56	262,537	265,102	273,444	22	22	22	98,105	102,461	106,275	Sect. 5. <u>Common Staff Costs</u> Ch. 1. Dependents' Allowance Ch. 2. Repatriation Grant Ch. 3. Pension Fund Ch. 4. Staff Insurance Ch. 5. Home Leave Travel Ch. 6. Recruitment Travel Ch. 7. Reimbursement of Income Tax	
3	3	3	33,365	33,952	34,395				14,000	14,000	14,000		
2	2	4	13,460	13,869	21,011	4	4	4	25,120	25,631	26,030		
13	13	13	73,070	75,257	76,783	6	6	6	33,015	34,191	35,366	Sect. 6. <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	
3	3	3	15,062	15,601	16,140	2	2	2	13,276	13,703	14,166		
21	21	23	134,957	138,679	148,329	12	12	12	85,411	87,525	89,562	TOTAL - PART II	
			13,000	13,000	13,434				5,650	5,650	5,650		
			9,052	6,763	5,881				2,800	2,800	2,800		
			78,157	81,143	84,286				39,176	40,444	41,593		
			5,759	5,832	6,104				2,797	2,887	2,968		
			10,330	19,990	13,630					5,330	2,300		
			11,700						3,300				
			56,085	58,889	61,833				45,968	48,024	50,785		
			184,083	185,617	185,168				99,691	105,135	106,096		
			26,881	26,881	26,881				9,542	9,542	9,542		
			26,510	26,510	26,510				14,550	14,550	14,550		
			15,300	15,300	15,300				5,430	5,430	5,430		
			3,670	3,670	3,670				1,300	1,300	1,300		
			1,500	1,500	1,500				1,500	1,500	1,500		
			73,861	73,861	73,861				32,322	32,322	32,322		
121	120	122	911,509	927,055	949,999	51	51	51	491,622	506,502	516,008		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1	1,000 1,687	1,000 2,966	1,000 3,096							4 10 6	4 10 6	4 10 6	40,822 48,754 36,286	41,631 51,674 37,485	42,250 53,184 38,579
1	1	1	2,687	3,966	4,096							20	20	20	125,862	130,790	134,013
3	3	3	10,226	10,678	11,123							2 16	2 15	2 15	23,029 70,041	23,332 65,462	23,779 67,572
2	2	2	8,834	9,179	9,524							12	12	12	58,187	61,121	63,266
3	3	3	9,428	9,828	10,426							25	25	25	111,947	117,002	121,558
3	3	3	9,516	9,906	10,296							35	35	35	135,442	140,237	144,913
11	11	11	38,004	39,591	41,369							90	89	89	398,646	407,154	421,088
			1,000	2,000	2,000	2	2		2,380 6,242	4,388 10,954	3,508 4,628	3	3 8 19	3 8 19	50,745 44,822 106,085	54,340 50,454 109,448	53,903 51,669 112,149
			1,000	2,000	2,000	2	2		8,622	15,342	8,136	35	35	35	229,990	243,546	248,027
			600 100 5,501 393	600 100 5,903 422	600 100 6,166 438				434 829 60	800 1,454 104	366 1,160 615 44 3,512				19,684 11,952 123,663 9,009 10,330 15,000 105,277	20,050 9,663 128,944 9,245 25,320 110,406	20,050 9,941 132,660 9,554 19,442 115,985
			2,824	2,975	3,124				400	518	243				105,277	110,406	115,985
			9,418	10,000	10,428				1,723	2,876	5,940				294,915	303,628	307,632
			3,897 2,640 2,220 530	3,897 2,640 2,220 530	3,897 2,640 2,220 530										40,320 43,700 22,950 5,500 3,000	40,320 43,700 22,950 5,500 3,000	40,320 43,700 22,950 5,500 3,000
			9,287	9,287	9,287										115,470	115,470	115,470
12	12	12	63,046	67,694	70,030	2	2		10,345	18,218	14,076	186	185	185	1,476,522	1,519,469	1,550,113

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						SUMMARY	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$	PART III PAN AMERICAN SANITARY BUREAU - FIELD AND OTHER PROGRAMS Sect. 1. <u>Zone Offices</u> Ch. 1. Zone II Ch. 2. Zone III Ch. 3. Zone IV Ch. 4. Zone V Ch. 5. Zone VI Ch. 6. Field Office (Zones I) Sect. 2. <u>Programs</u> Ch. 1. Malaria and Insect Control Ch. 2. Tuberculosis Ch. 3. Venereal Diseases and Treponematoses Ch. 4. Endemo-Epidemic Diseases Ch. 5. Public Health Administration Ch. 6. Nursing Ch. 7. Social and Occupational Health Ch. 8. Health Education of the Public Ch. 9. Maternal and Child Health Ch. 10. Mental Health Ch. 11. Nutrition Ch. 12. Environmental Sanitation Ch. 13. Other Projects Less: <u>Delays in implementation</u> <u>of new projects</u> Sect. 3. <u>Publications of the PASB</u> Ch. 1. PASB Bulletin Ch. 2. Weekly and Quarterly Epidemiological Report Ch. 3. Special Publications Ch. 4. AIDIS Journal	
14	14	14	74,447	84,245	75,886	2	2	2	28,154	26,957	26,874		
16	16	16	87,865	86,393	89,666	1	1	1	13,366	12,500	13,987		
16	16	16	92,217	90,734	93,366	1	1	1	13,415	11,974	13,333		
10	10	10	58,000	57,405	60,085				320	320	320		
15	14	14	100,966	99,165	104,902	1	1	1	17,875	12,841	11,979		
4	4	4	27,687	28,087	30,947				106	106	106		
75	74	74	441,182	446,029	454,852	5	5	5	73,236	64,698	66,599		
8	19	18	87,295	196,100	188,714	1			12,513	2,500	2,500		
3	3	2	46,861	32,770	27,633	2	2	1	23,245	22,121	17,875		
6	6	4	130,583	119,782	100,107	1	1	2	53,237	38,311	77,994		
12	10	9	134,202	92,140	105,603	8	14	13	96,352	177,410	191,821		
4	4	3	52,661	42,593	28,517	7	11	11	89,908	127,938	159,211		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			130	130	130							16	16	16	102,731	111,332	102,890
			130	130	130							17	17	17	101,361	99,023	103,783
			130	130	130							17	17	17	105,762	102,838	106,829
			130	130	130							10	10	10	58,450	57,855	60,535
			130	130	130							16	15	15	118,971	112,136	117,011
			34	34	34							4	4	4	27,827	28,227	31,087
			684	684	684							80	79	79	515,102	511,411	522,135
29	33	33	222,417	271,658	282,207	12			3,040,797	2,540,000	3,810,000	49	52	51	3,350,509	3,007,758	4,280,921
						3	2		96,974	7,342		4	2		109,487	9,842	2,500
2	4	4	18,656	36,227	47,656					240,000	60,000	7	7	7	88,762	331,118	153,164
2	1	2	32,133	20,998	30,057					177,343	219,079	12	15	14	334,813	356,434	427,237
48	53	56	648,493	600,254	727,246	3	7	6	394,000	620,000	411,600	68	77	78	1,273,047	1,489,804	1,436,270
5	7	7	53,211	58,478	64,733							16	22	21	195,780	229,009	252,461
			5,600						250,000	188,000	250,000	3	3	3	28,668	33,459	32,514
												1	1	1	267,152	225,155	288,657
1	1	1	14,306	7,929	16,656	21	21	21	121,667	83,500	75,000	25	25	25	178,861	133,751	136,473
	1	2	11,303	53,956	74,945	58	60	60	248,218	294,276	320,484	1	2	2	92,436	170,147	172,425
												60	61	61	427,468	442,298	512,787
															(9,539)		(2,158)
87	100	105	1,006,119	1,049,500	1,243,500	97	90	87	4,270,516	4,190,461	5,146,163	246	269	263	6,372,423	6,419,236	7,693,251
															30,000	30,000	30,000
															1,500	1,500	1,500
															22,000	10,000	10,000
															5,000	5,000	5,000
															58,500	46,500	46,500
87	100	105	1,006,803	1,050,184	1,244,184	97	90	87	4,270,516	4,190,461	5,146,163	326	348	342	6,946,025	6,977,147	8,261,886

ESTIMATED EXPENDITURE												BUDGET SUMMARY BY RELATED ACTIVITY	
P A S B						W H O R E G U L A R							
1 9 5 5		1 9 5 6		1 9 5 7		1 9 5 5		1 9 5 6		1 9 5 7			
\$	%	\$	%	\$	%	\$	%	\$	%	\$	%		
												GROUP I	
												<u>Administrative Services</u>	
90,130	4.3	92,692	4.2	93,421	4.2	33,896	3.0	34,175	2.9	34,475	2.6	Office of the Director	
15,420	.7	15,690	.7	15,960	.7	49,085	4.3	49,345	4.2	49,560	3.8	Office of Public Information	
6,235	.3	6,450	.3	6,665	.3	21,936	1.9	22,431	1.9	22,926	1.8	Office of Coordination	
216,991	10.3	225,510	10.3	232,827	10.6	83,836	7.4	87,269	7.4	90,443	6.9	Division of Administration (Excluding Supply Office)	
73,861	3.5	73,861	3.4	73,861	3.4	32,322	2.9	32,322	2.7	32,322	2.5	Common Services - Headquarters	
82,565	4.0	90,897	4.1	87,726	4.0	48,575	4.3	50,505	4.3	52,446	4.0	Common Staff Costs	
485,202	23.1	505,100	23.0	510,460	23.2	269,650	23.8	276,047	23.4	282,172	21.6	TOTAL - GROUP I	
												GROUP II	
												<u>Technical Services and Supply</u>	
134,957	6.4	138,679	6.3	148,329	6.8	85,411	7.6	87,525	7.4	89,562	6.9	Division of Public Health	
62,946	3.0	64,878	2.9	66,502	3.0	60,229	5.3	61,946	5.2	63,415	4.9	Division of Education and Training	
30,142	1.4	31,049	1.4	31,773	1.4	5,375	.5	5,375	.5	5,375	.4	Library	
51,198	2.5	53,037	2.4	54,876	2.5	5,572	.5	5,787	.5	6,002	.5	Editorial Office	
45,546	2.2	39,592	1.8	40,617	1.8	14,269	1.3	15,192	1.3	15,832	1.2	Supply Office	
441,182	21.0	446,029	20.3	454,852	20.7	73,236	6.5	64,698	5.5	66,599	5.1	Zone Offices	
101,518	4.8	94,720	4.4	97,442	4.5	51,116	4.4	54,630	4.6	53,650	4.0	Common Staff Costs	
867,489	41.3	867,984	39.5	894,391	40.7	295,208	26.1	295,153	25.0	300,435	23.0	TOTAL - GROUP II	
												GROUP III	
												<u>Field Projects and Publications</u>	
554,660	26.4	610,939	27.8	608,611	27.7	541,128	47.8	568,336	48.1	694,977	53.3	Programs	
58,500	2.8	46,500	2.1	46,500	2.1							Publications of the PASB	
613,160	29.2	657,439	29.9	655,111	29.8	541,128	47.8	568,336	48.1	694,977	53.3	TOTAL - GROUP III	
												GROUP IV	
												<u>Part I - Pan American Sanitary Organization</u>	
71,414	3.4	73,878	3.4	76,349	3.5	15,290	1.4	15,880	1.3	16,404	1.3	Conference Services	
39,489	1.9	68,962	3.0	39,489	1.8	7,111	.6	18,865	1.6	7,111	.6	Organizational Meetings	
23,246	1.1	26,637	1.2	24,200	1.0	3,099	.3	7,084	.6	3,312	.2	Common Staff Costs	
134,149	6.4	169,477	7.6	140,038	6.3	25,500	2.3	41,829	3.5	26,827	2.1	TOTAL - GROUP IV	
2,100,000	100	2,200,000	100	2,200,000	100	1,131,486	100	1,181,365	100	1,304,411	100	TOTAL BUDGET	

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
	1955	1956	1957	1955	1956	1957
	\$	\$	\$	\$	\$	\$
PAN AMERICAN SANITARY BUREAU	294,179	354,960	310,776	80,908	93,706	95,332
WORLD HEALTH ORGANIZATION	179,339	272,646	287,908	78,329	59,070	75,334
UNITED NATIONS TECHNICAL ASSISTANCE	480,737	661,285	735,022	90,481	99,825	112,079
OTHER EXTRA BUDGETARY FUNDS	257,097	268,176	292,057	71,131	33,156	34,318
TOTAL - ALL FUNDS	1,211,352	1,557,067	1,625,763	320,849	285,757	317,063
 PAN AMERICAN SANITARY BUREAU						
MALARIA AND INSECT CONTROL						
Argentina-51, Aedes aegypti Eradication	14,024	24,237	24,869	4,494	4,331	6,756
Bolivia-4, Malaria Eradication	8,673			2,100		
Cuba-1, Aedes aegypti Eradication	19,331	20,591	20,523	5,700	4,580	4,500
Uruguay-51, Aedes aegypti Eradication	7,949	8,151		1,051	700	
AMRO-88, Adviser on Aedes aegypti Eradication	13,148	13,172	13,505	5,285	7,138	5,361
AMRO-90, Eradication of Malaria (COMEP)		59,539	61,048		31,473	31,622
Total - Malaria and Insect Control	63,125	125,690	119,945	18,630	48,222	48,239
VENEREAL DISEASES AND TREPONEMATOSSES						
Dominican Republic-52, Venereal Disease Control	12,149	12,232	12,536	725	1,290	740
Haiti-1, Yaws Eradication and Syphilis Control	17,556	13,084	13,337	4,355	720	720
Mexico-13, Venereal Disease Training Course						
Venezuela-52, Venereal Disease Laboratory	9,376	4,641		2,400	503	
Total - Venereal Diseases and Treponematoses	39,081	29,957	25,873	7,480	2,513	1,460
ENDEMO-EPIDEMIC DISEASES						
Brazil-17, Hydatidosis Control						
Brazil-51, Yellow Fever Laboratory	1,742	1,818	1,818			
Brazil-53, Schistosomiasis	84	42		2,040	2,250	
Chile-14, Rabies Control						
Colombia-52, Yellow Fever, Carlos Finlay Institute						
Costa Rica-11, Poliomyelitis Rehabilitation	2,727			1,525		
AMRO-43, Hydatidosis Control						
AMRO-57, Yellow Fever Studies	24,219	25,894	26,551	11,488	8,940	10,390
AMRO-74, Plague Investigation	8,021	8,220		313	1,400	
AMRO-83, Typhus Control (Bolivia, Peru)	14,966	14,420	2,100	3,000	2,250	1,800
AMRO-92, Poliomyelitis						
Total - Endemo-Epidemic Diseases	51,759	50,394	30,469	18,366	11,840	12,190
PUBLIC HEALTH ADMINISTRATION						
Bolivia-10, Public Health Services	14,680	24,886	25,592	6,661	1,539	6,839
Dominican Republic-4, Reorganization of Local Health Services	26,043	29,566	30,244	7,180	2,237	7,704
Ecuador-4, Rural Public Health Services	17,687			4,145		
Haiti-9, Public Health Laboratory	5,771	8,456		1,856	600	
El Paso - Field Office	19,774	20,551	22,919	3,200	2,500	2,500
Total - Public Health Administration	83,955	83,459	78,755	23,042	6,876	17,043
NURSING						
Mexico-11, Course for Nursing Instructors	1,724	4,900		960	4,200	
Mexico-12, National University School of Nursing	25,077	26,138	20,517		2,355	
AMRO-46, Workshop on Nursing Education						
Total - Nursing	26,801	31,038	20,517	960	6,555	

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
	1955	1956	1957	1955	1956	1957
	\$	\$	\$	\$	\$	\$
<u>PAN AMERICAN SANITARY BUREAU (continued)</u>						
MATERNAL AND CHILD HEALTH						
AMRO-94, Control of Diarrheal Diseases in Childhood		2,800	2,800		2,400	2,400
Total - Maternal and Child Health		2,800	2,800		2,400	2,400
NUTRITION						
AMRO-54, Assistance to INCAP	4,200	4,200	4,200	8,600	8,600	8,600
Assistance to INCAP - Administration	25,258	26,022	26,817	3,830	2,500	4,200
Total - Nutrition	29,458	30,222	31,017	12,430	11,100	12,800
OTHER PROJECTS						
AMRO-22, Training Center for Public Health Nurses and Sanitary Inspectors		1,400			1,200	
AMRO-35, Fellowships (Unspecified)			1,400			1,200
AMRO-75, Statistical Education						
Total - Other Projects		1,400	1,400		1,200	1,200
TOTAL - ALL DISEASES	294,179	354,960	310,776	80,908	93,706	95,332
<u>WORLD HEALTH ORGANIZATION</u>						
TUBERCULOSIS						
Ecuador-5, Tuberculosis Teaching Center	2,121			1,800		
Surinam-3, BCG Vaccination						
AMRO-31, BCG Statistician	2,674			1,958		
Total - Tuberculosis	4,795			3,758		
VENEREAL DISEASES AND TREPONEMATOSIS						
Chile-11, Cardiolipin Production Center	14,119	18,231	9,635	2,706	2,890	2,190
Haiti-1, Yaws Eradication and Syphilis Control						
AMRO-66, Seminar on Venereal Diseases						
Total - Venereal Diseases and Treponematoses	14,119	18,231	9,635	2,706	2,890	2,190
ENDEMO-EPIDEMIC DISEASES						
Mexico-20, Virus Center		700	700		600	600
Paraguay-9, Leprosy Control						
Uruguay-6, National Zoonosis Institute						
Venezuela-5, Onchocerciasis Investigation	2,100			1,800		
AMRO-26, Brucellosis Training Course			2,100			1,800
AMRO-58, Leprosy Control (Caribbean)	2,100			1,800		
AMRO-61, Rabies Control	7,787	8,381	9,194	6,000	5,400	6,400
AMRO-76, Vaccine Testing						
AMRO-91, Seminar on Application of International Sanitary Regulations				2,460		
AMRO-92, Poliomyelitis			1,400			3,600
AMRO-96, Plague Training Course						
Total - Endemo-Epidemic Diseases	11,987	9,081	13,394	12,060	6,000	12,400

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
	1955	1956	1957	1955	1956	1957
	\$	\$	\$	\$	\$	\$
WORLD HEALTH ORGANIZATION (continued)						
PUBLIC HEALTH ADMINISTRATION						
Argentina-4, Malbran Institute	1,400	9,423	9,650	1,200	1,500	750
Brazil-18, National Drug Service	1,441	8,669		1,500	800	
Ecuador-4, Rural Public Health Services		16,401	16,830		6,086	4,586
Guatemala-8, Rural Public Health Services	30,781	36,254	37,083	4,385	1,479	5,750
Mexico-22, Integrated State Health Services	6,655	31,238	32,097	3,000	3,250	3,000
United States-7, Public Health Administration Fellowships						
AMRO-45, Laboratory Biological Facilities	4,200	4,200	4,200	3,600	3,600	3,600
AMRO-85, Latin American Center for Classification of Diseases						
AMRO-86, Health Statisticians	8,640	16,302	16,731	5,750	8,808	7,789
Total - Public Health Administration	53,117	122,487	116,591	19,435	25,523	25,475
NURSING						
Argentina-3, Nursing Education						
Bolivia-5, Nursing Education	19,441	21,248	21,678	1,970	500	1,850
Chile-20, Midwifery Education		7,104	7,306		1,500	750
Ecuador-16, Nursing Education		7,544	14,078		1,757	2,514
Guatemala-6, Training of Auxiliary Nurses	3,290	7,977	8,179	1,775	525	1,025
Haiti-10, Training of Midwives	3,836	2,740		916	550	
Nicaragua-5, Nursing Education	11,102	21,133	21,739	2,078	1,250	3,880
AMRO-23.4, Fourth Regional Nursing Congress						
AMRO-28, Advanced Nursing Education		7,110	7,312		1,500	750
AMRO-46, Workshop on Nursing Education			1,050			900
Total - Nursing	37,669	74,856	81,342	6,739	7,582	11,669
HEALTH EDUCATION OF THE PUBLIC						
AMRO-29, Cultural Anthropology	20,497	10,264	10,516	1,720	1,550	600
AMRO-93, Health Educator	4,351	19,670	20,148	1,500	1,475	750
Total - Health Education of the Public	24,848	29,934	30,664	3,220	3,025	1,350
MATERNAL AND CHILD HEALTH						
Brazil-3, Maternal and Child Health						
Chile-12, Demonstration Center for Care of Prematures	3,552	7,205	7,407	1,500	250	1,550
Total - Maternal and Child Health	3,552	7,205	7,407	1,500	250	1,550
MENTAL HEALTH						
AMRO-9.2, Seminar on Mental Health	2,140			4,200		
Total - Mental Health	2,140			4,200		
ENVIRONMENTAL SANITATION						
Bolivia-6, Study of Water Supply (La Paz)						
AMRO-1, Environmental Sanitation Training (Brazil, Chile, Mexico)	4,903	3,501		3,730	2,000	
AMRO-17, Waterworks Training Course	4,200	4,200	8,400	3,600	3,600	7,200
Total - Environmental Sanitation	9,103	7,701	8,400	7,330	5,600	7,200
OTHER PROJECTS						
Argentina-5, Library, National University Medical School	2,803	4,290				
Brazil-19, School of Public Health		2,800	11,433		2,400	3,900
Paraguay-6, Department of Preventive Medicine, School of Medicine	1,732			1,845		

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
	1955	1956	1957	1955	1956 -	1957
	\$	\$	\$	\$	\$	\$
WORLD HEALTH ORGANIZATION (continued)						
OTHER PROJECTS (continued)						
AMRO-18, Medical and Public Health Education	4,200	4,200	4,200	3,600	3,600	3,600
AMRO-48, Seminar on Teaching of Public Health in Schools of Veterinary Medicine			2,800			2,400
AMRO-49, Seminar on Teaching of Preventive Medicine	1,574	1,400		5,336	2,200	
AMRO-67, Veterinary Medicine Education	3,500		4,200	3,000		3,600
AMRO-68, Survey of Pediatric Education	4,200			3,600		
Total - Other Projects	18,009	12,690	22,633	17,381	8,200	13,500
SUB-TOTAL - ALL DISEASES	179,339	282,185	290,066	78,329	59,070	75,334
Less: Delay Factor for New Projects in 1956 and 1957		9,539	2,158			
TOTAL - ALL DISEASES	179,339	272,646	287,908	78,329	59,070	75,334
UNITED NATIONS TECHNICAL ASSISTANCE						
MALARIA AND INSECT CONTROL						
Bolivia-4, Malaria Eradication		7,623	7,850		1,389	1,239
Colombia-5, Malaria and <u>Aedes aegypti</u> Eradication	22,053	31,681	32,626	3,794	2,034	3,704
Cuba-5, Malaria Eradication		5,715	7,794		900	750
Dominican Republic-2, Malaria and <u>Aedes aegypti</u> Eradication	13,823	12,842	13,287	3,090	1,603	1,550
Haiti-4, Malaria and <u>Aedes aegypti</u> Eradication	16,208	21,334	22,165	3,235	1,300	2,825
Mexico-53, Malaria and <u>Aedes aegypti</u> Eradication	33,321	44,662	46,023	6,160	7,108	6,400
Paraguay-1, Malaria Eradication	4,200	4,200		3,600	1,800	
AMRO-7, Malaria and <u>Aedes aegypti</u> Eradication (Central America and Panama)	23,244	31,368	32,454	6,090	9,750	7,300
AMRO-8, Malaria and <u>Aedes aegypti</u> Eradication (Caribbean)	28,969	48,156	50,000	8,374	12,553	11,100
Total - Malaria and Insect Control	141,818	207,581	212,199	34,343	38,437	34,868
VENEREAL DISEASES AND TREPONEMATOSES						
Brazil-20, Yaws Eradication		7,622	15,472		1,800	1,500
AMRO-47, Yaws Eradication and Syphilis Control (Caribbean)	12,926	17,289	17,718	4,390	6,013	6,966
Total - Venereal Diseases and Treponematoses	12,926	24,911	33,190	4,390	7,813	8,466
ENDEMO-EPIDEMIC DISEASES						
Brazil-8, Immuno- and Histo-Chemistry Demonstration			4,445			900
Brazil-17, Hydatidosis Control						
Brazil-21, Trachoma Control			3,812			900
Ecuador-11, National Institute of Health	12,937	3,811		3,196	1,187	
AMRO-54, Zoonosis Control						
Total - Endemo-Epidemic Diseases	12,937	3,811	8,257	3,196	1,187	1,800
PUBLIC HEALTH ADMINISTRATION						
Argentina-7, Local Health Services			16,166			2,700
Barbados-2, Local Health Services	5,388	21,718	22,374	2,700		2,700
Brazil-16, Public Health Administration Fellowships						
British Honduras-3, Public Health Administration Fellowships						
Chile-18, Public Health Administration Fellowships						
Chile-19, Food and Drug Control						
Colombia-4, Rural Public Health Services	14,521	32,752	33,813	3,400	2,710	3,886
Cuba-3, Public Health Services		10,874	21,883		2,700	2,250
Dominican Republic-7, Public Health Administration Fellowships						
El Salvador-5, Health Demonstration Area	37,457	39,091	40,316	1,850	3,200	1,550
Guatemala-7, Public Health Administration Fellowships						

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			CONTRACTUAL AGREEMENTS			T O T A L		
1955	1956	1957	1955	1956	1957	1955	1956	1957	1955	1956	1957
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
10,000	5,400	10,400	37,800	35,000	30,000				55,600	48,200	48,200
3,000	3,100	250	25,090	15,100	10,000				35,000	21,800	15,450
1,000			5,300						11,800		7,800
									8,800		
15,500	8,500	10,650	68,190	50,100	49,000				119,080	79,490	95,783
53,320	42,840	54,985	226,410	190,050	273,020	3,730	3,730	3,730	541,128	577,875	697,135
										9,539	2,158
53,320	42,840	54,985	226,410	190,050	273,020	3,730	3,730	3,730	541,128	568,336	694,977
			4,800						30,647	9,012	9,089
	2,500	2,500		800	800				33,715	33,715	36,330
996	1,500			3,000					7,415	9,344	9,344
3,000			18,100						16,913	16,913	17,337
									19,443	27,134	24,990
5,920	6,000	6,000		4,000	12,000				58,577	51,770	52,423
7,840	7,840	7,840	5,600		6,000				10,800	6,000	
									35,254	51,118	57,754
									50,783	68,549	74,940
17,756	17,840	16,340	28,500	7,800	18,800				222,417	271,658	282,207
			1,340	3,503	2,000				18,656	9,422	18,972
					4,000					26,805	28,684
			1,340	3,503	6,000				18,656	36,227	47,656
				4,000	4,000					4,000	5,345
			4,000						20,133	4,998	4,000
			12,000	12,000	16,000				12,000	12,000	4,712
											16,000
			16,000	16,000	20,000				32,133	20,998	30,057
		15,000	23,000	5,460	12,000				31,088	27,178	45,866
			4,200		12,000				4,200		37,074
			10,200		4,000				10,200		4,000
			7,700		8,000				7,700		8,000
					8,000						8,000
			3,000	24,000	8,000				20,921	32,000	45,699
	8,000									35,462	24,133
			23,800		8,000				23,800	13,574	8,000
14,000	2,000	1,000	17,100	8,000	6,000				70,407	52,291	48,866
			20,800		8,000				20,800		8,000

ESTIMA

PERSONAL SERVICES
AND ALLOWANCESTRAVEL AND
TRANSPORTATION

1955

1956

1957

1955

1956

1957

\$

1

\$

PUBLIC HEALTH ADMINISTRATION (continued)

Haiti-2, Local Health Services
Honduras-4, Rural Public Health Services
Jamaica-5, Public Health Administration Fellowships
Nicaragua-3, Rural Public Health Services
Panama-1, Rural Public Health Services
Paraguay-10, Public Health Services
Peru-13, Public Health Demonstration and Training Center
Peru-22, Public Health Services
Uruguay-5, Rural Health Services
Venezuela-1, Local Health Services
Venezuela-4, Public Health Administration Fellowships
AMRO-6, Joint Field Mission on Indigenous Populations
AMRO-10, Inter-American Center of Biostatistics

Total - Public Health Administration

NURSING

Bolivia-5, Nursing Education
Brazil-22, Nursing Education
Costa Rica-3, Nursing Education
Cuba-4, Nursing Education

Total - Nursing

MATERNA AND CHILD HEALTH

Peru-10. Maternal and Child Health and Related Services

Total - Maternal and Child Health

NUTRITION

Ecuador-53, National Institute of Nutrition

Total - Nutrition

ENVIRONMENTAL SANITATION

Bolivia-6, Study of Water Supply (La Paz)
Brazil-12, Refuse Disposal
AMRO-50, Fluoridation of Water
AMRO-62, Housing Sanitation
AMRO-64, Seminar on Sanitary Engineering
AMRO-95, Environmental Sanitation (Caribbean)
AMRO-97, Seminar on Training of Sanitary Inspectors

Total - Environmental Sanitation

TOTAL - ALL DISEASES

OTHER EXTRA BUDGETARY FUNDS

MALARIA AND INSECT CONTROL

Bolivia-4, Malaria Eradication
Colombia-5, Malaria and Aedes aegypti Eradication
Dominican Republic-2, Malaria and Aedes aegypti Eradication
Haiti-4, Malaria and Aedes aegypti Eradication
Mexico-53, Malaria and Aedes aegypti Eradication
AMRO-7, Malaria and Aedes aegypti Eradication
AMRO-8, Malaria and Aedes aegypti Eradication (Caribbean)
AMRO-90, Eradication of Malaria

Total - Malaria and Insect Control

9,044	19,840 21,829	27,100 27,383	2,700	3,500 750	3,000 3,050
19,189 47,546	28,188 33,150	29,095 34,150	1,650 3,200	1,550 3,100	2,250 1,400
76,206 9,552	67,161	55,314	7,836 2,250	10,434	8,546
7,183 7,822	20,900 21,773	28,510 28,738	3,000	3,600 1,230	3,000 3,630
	21,795	22,451	3,830	1,880	3,380
10,744 27,842	15,717 14,240	16,171 14,493	2,558 6,825	250 3,600	2,250 4,825
72,494	369,028	417,957	41,799	38,504	48,417

36,556	4,733 25,256 8,389	6,462 19,810 11,511	1,850	900 2,300 1,700	800 1,150 1,500
36,556	38,378	37,783	1,850	4,900	3,450

1,906	7,679	7,906	900	250	750
1,906	7,679	7,906	900	250	750

		5,718			900
	2,100	2,100		1,800	1,800
2,100	2,100	2,100	1,800	1,800	1,800
			2,203	2,056	2,056
	5,697	7,812		3,078	3,051
					4,721

180,737	661,285	735,022	90,481	99,825	112,079
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39,057		29,107	
39,057		29,107	

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			CONTRACTUAL AGREEMENTS			T O T A L		
1955	1956	1957	1955	1956	1957	1955	1956	1957	1955	1956	1957
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
	4,000	4,000	28,200 8,000 13,700	8,000 8,000	8,000 12,000				28,200 19,744 13,700	31,340 34,579	38,100 46,433
6,000 13,000 20,000	6,000 4,000 6,762	4,000 4,000 14,472	7,000 10,000 19,000 6,000	10,000 10,000 12,000	12,000 10,000 12,000				33,839 73,746 123,042 17,802	45,738 50,250 96,357	47,345 49,550 90,332
			12,000 12,000 3,400	8,000 6,000 12,000	8,000 6,000 12,000 8,000				22,183 23,652 3,400	32,500 29,003 35,675	39,510 38,368 37,831 8,000
20,000	5,000	5,000	32,100	30,500	36,400		15,000	15,000	86,767	15,967 68,340	18,421 75,718
73,000	35,762	47,472	261,200	141,960	198,400		15,000	15,000	648,493	600,254	727,246
			3,680	3,000	6,000				3,680	3,000	6,000
3,725	2,400 1,000	2,000 5,000	7,400	4,000 4,800	4,000 6,500				49,531	5,633 33,956 15,889	7,262 26,960 24,511
3,725	3,400	7,000	11,080	11,800	16,500				53,211	58,478	64,733
			5,600						5,600		
			5,600						5,600		
500			11,000		8,000				14,306	7,929	16,656
500			11,000		8,000				14,306	7,929	16,656
				5,000	4,000					5,000	10,618
200	3,000 100 1,000	3,000 350 1,000 600	5,000	3,500 7,000 7,500 8,225	4,000 7,000 7,500 7,137 8,300				3,900 7,403	10,400 11,000 10,556 17,000	10,900 11,250 10,556 18,000 13,621
200	4,100	4,950	5,000	31,225	37,937				11,303	53,956	74,945
95,181	61,102	75,762	339,720	212,288	305,637		15,000	15,000	1,006,119	1,049,500	1,243,500
169,000 2,600,000 120,000 68,000 15,633	50,000 2,000,000 360,000 130,000	90,000 1,200,000 50,000 2,000,000 360,000 110,000							2) 169,000 2,600,000 120,000 1) 68,000 83,797	50,000 2,000,000 360,000 130,000	90,000 1,200,000 50,000 2,000,000 360,000 110,000
2,972,633	2,540,000	3,810,000							3,040,797	2,540,000	3,810,000

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

ESTIMA

OTHER EXTRA BUDGETARY FUNDS (continued)

TUBERCULOSIS

Colombia-15, Tuberculosis Control - BCG
Guatemala-11, BCG Vaccination
Honduras-5, BCG Vaccination
Paraguay-7, BCG Vaccination
Surinam-3, BCG Vaccination

Total - Tuberculosis

VENEREAL DISEASES AND TREPONEMATOSES

Brazil-20, Yaws Eradication
AMRO-47, Yaws Eradication and Syphilis Control

Total - Venereal Diseases and Treponematoses

ENDEMO-EPIDEMIC DISEASES

Brazil-21, Trachoma Control
Paraguay-9, Leprosy Control
AMRO-57, Yellow Fever Studies
AMRO-60, Smallpox Eradication
AMRO-81, Pan American Zoonoses Center

Total - Endemo-Epidemic Diseases

PUBLIC HEALTH ADMINISTRATION

Barbados-2, Local Health Services
Bolivia-10, Public Health Services
Chile-16, Rural Health Services (Linares)
Colombia-4, Rural Public Health Services
Cuba-3, Public Health Services
Dominican Republic-4, Reorganization of Local Health Services
Ecuador-4, Rural Public Health Services
Guatemala-8, Rural Public Health Services
Haiti-2, Local Health Services
Honduras-4, Rural Public Health Services
Mexico-22, Integrated State Health Services
Nicaragua-3, Rural Public Health Services
Panama-1, Rural Public Health Services
Paraguay-10, Public Health Services
Peru-22, Public Health Services
Uruguay-5, Rural Health Services
Venezuela-1, Local Health Services

Total - Public Health Administration

MATERNAL AND CHILD HEALTH

Brazil-3, Maternal and Child Health
Brazil-23, School Health Services
Costa Rica-7, Maternal and Child Health and School Health
Services
El Salvador-7, School Health Services
French Guiana- 1, Maternal and Child Health
Venezuela-6, School Health Services

Total - Maternal and Child Health

NUTRITION

AMRO-54, Assistance to INCAP

Total - Nutrition

PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
1955	1956	1957	1955	1956	1957
\$	\$	\$	\$	\$	\$
9,525 2,100 2,100 11,216 2,100	3,136 706		 1,800 1,800 4,533 1,800	2,300 1,200	
27,041	3,842		9,933	3,500	
20,372	31,950 42,372	21,676 67,500	5,878	700 9,496	2,800 3,525
20,372	74,322	89,176	5,878	10,196	6,325
53,371	60,339	62,982	2,700	2,700	2,700
53,371	60,339	62,982	2,700	2,700	2,700

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

SUPPLIES AND EQUIPMENT			FELLOWSHIPS AND PARTICIPANTS			CONTRACTUAL AGREEMENTS			T O T A L		
1955	1956	1957	1955	1956	1957	1955	1956	1957	1955	1956	1957
\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
35,000 25,000									*9,525 38,900 28,900 *15,749 3,900	5,436 1,906	
60,000									96,974	7,342	
	130,000 110,000	60,000								130,000 110,000	60,000
	240,000	60,000								240,000	60,000
20,000 18,000 49,365 500	18,000 13,310 28,515	34,000 18,000 8,028 36,550	4,745	23,000 10,000	27,000				*20,000 (3) 18,000 (4) 80,360 (5) 500	(3) 18,000 (4) 68,960 (5) 90,383	34,000 (3) 18,000 (4) 32,504 (5) 134,575
87,865	59,825	96,578	4,745	33,000	27,000				118,860	177,343	219,079
56,000 70,000 115,000 50,000 26,000	60,000 50,000 40,000 55,000 40,000 90,000 125,000 65,000 20,000	57,600 55,000 35,000 40,000 50,000 50,000 25,000 44,000 55,000							56,000 *70,000 115,000 50,000 *26,000	60,000 50,000 40,000 55,000 40,000 90,000 125,000 65,000 20,000	57,600 55,000 35,000 40,000 50,000 50,000 25,000 44,000 55,000
394,000	620,000	411,600							394,000	620,000	411,600
250,000	40,000 25,000 30,000 30,000 63,000	250,000							250,000	40,000 25,000 30,000 30,000 63,000	250,000
250,000	188,000	250,000							250,000	188,000	250,000
64,996	19,748	8,605				600	713	713	(6) 121,667	(6) 83,500	(6) 75,000
64,996	19,748	8,605				600	713	713	121,667	83,500	75,000

*Allocated by UNICEF Executive Board

SUMMARY OF PROGRAMS BY MAJOR EXPENSE

E S T I M A

	PERSONAL SERVICES AND ALLOWANCES			TRAVEL AND TRANSPORTATION		
	1955	1956	1957	1955	1956	1957
	\$	\$	\$	\$	\$	\$
<u>OTHER EXTRA BUDGETARY FUNDS (continued)</u>						
ENVIRONMENTAL SANITATION						
AMRO-95, Environmental Sanitation (Caribbean)						
Total - Environmental Sanitation						
OTHER PROJECTS						
AMRO-77, Pan American Foot and Mouth Disease Center	117,256	129,673	139,899	23,513	16,760	25,293
Total - Other Projects	117,256	129,673	139,899	23,513	16,760	25,293
TOTAL - ALL DISEASES	257,097	268,176	292,057	71,131	33,156	34,318
1) Of this amount \$18,000 has already been allocated by the UNICEF Executive Board.						
2) Of this amount \$159,000 has already been allocated by the UNICEF Executive Board.						
3) Gorgas Memorial Laboratory.						
4) Allocated by the VI Directing Council \$ 75,000						
Allocated by the XIV Pan American Sanitary Conference <u>144,089</u>						
\$219,089						
Obligated through 31 December 1954 <u>37,265</u>						
Balance available <u>\$181,824</u>						
5) Organization of American States Technical Assistance.						
6) Of the total, \$75,000 is made up of Quota Contributions of Member Governments to INCAP; the balance being comprised of various contributions.						

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						TOTAL OPERATIONS BY ZONE	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$	<u>ZONE I OPERATIONS</u>	
			27,687	28,087	30,947				106	106	106	Field Office Costs (Jamaica)	
												<u>Cost of Projects</u>	
				11,600	12,400				14,980			Zone Projects (Including Inter-Country)	
				11,600	12,400				14,980			Total Projects	
			27,687	39,687	43,347				15,086	106	106	TOTAL - ZONE I OPERATIONS	
												<u>ZONE II OPERATIONS</u>	
			74,447	84,245	75,886				28,154	26,957	26,874	Zone Office Costs	
												<u>Cost of Projects</u>	
			177,167	146,249	129,121				40,732	63,899	55,922	Zone Projects	
			900						22,087	16,781	24,594	Inter-Zone Projects Administered by Zone II: (1955: AMRO-46, 61) (1956: AMRO-23, 61) (1957: AMRO-61)	
			178,067	146,249	129,121				62,819	80,680	80,516	Total Projects	
			252,514	230,494	205,007				90,973	107,637	107,390	TOTAL - ZONE II OPERATIONS	
												<u>ZONE III OPERATIONS</u>	
			87,865	86,393	89,666				13,366	12,500	13,987	Zone Office Costs	
												<u>Cost of Projects</u>	
			85,257	80,556	84,758				103,228	100,932	124,327	Zone Projects (Including Inter-Country)	
									22,600			Inter-Zone Projects Administered by Zone III: (1955: AMRO-17, 91) (1957: AMRO-97)	
			85,257	80,556	84,758				125,828	100,932	124,327	Total Projects	
			173,122	166,949	174,424				139,194	113,432	138,314	TOTAL - ZONE III OPERATIONS	
												<u>ZONE IV OPERATIONS</u>	
			92,217	90,734	93,366				13,415	11,974	13,333	Zone Office Costs	
												<u>Cost of Projects</u>	
			133,370	89,507	79,779				35,732	69,036	77,036	Zone Projects	
										12,500	12,500	Inter-Zone Projects Administered by Zone IV: (1955: AMRO-6) (1956: AMRO-6, 91) (1957: AMRO-6, 96)	
			133,370	89,507	79,779				35,732	81,536	89,536	Total Projects	
			225,587	180,241	173,145				49,147	93,510	102,869	TOTAL - ZONE IV OPERATIONS	

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						TOTAL OPERATIONS BY ZONE	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$		
			58,000	57,405	60,085				320	320	320	<u>ZONE V OPERATIONS</u>	
												Zone Office Costs	
			17,866	9,110	6,818				4,541	25,169	32,333	<u>Cost of Projects</u>	
												Zone Projects	
												Inter-Zone Projects Administered by Zone V: (1955-6-7: AMRO-77)	
			17,866	9,110	6,818				4,541	25,169	32,333	Total Projects	
			75,866	66,515	66,903				4,861	25,489	32,653	TOTAL - ZONE V OPERATIONS	
												<u>ZONE VI OPERATIONS</u>	
			100,966	99,165	104,902				17,875	12,841	11,979	Zone Office Costs	
												<u>Cost of Projects</u>	
			35,518	54,919	48,625				33,452	59,572	70,763	Zone Projects (Including Inter-Country)	
									40,440	14,610	22,562	Inter-Zone Projects Administered by Zone VI: (1955: AMRO-9,10,28,81) (1956-7: AMRO-10,28,81)	
			35,518	54,919	48,625				73,892	74,182	93,325	Total Projects	
			136,484	154,084	153,527				91,767	87,023	105,304	TOTAL - ZONE VI OPERATIONS	
												<u>FIELD ACTIVITIES ADMINISTERED BY HEADQUARTERS - WASHINGTON</u>	
												<u>Cost of Projects</u>	
												Inter-Zone Projects Administered by Headquarters - Washington: (1955: AMRO-1,18,31,35,45,49,60, AMRO-62,64,67,68,76,85,86, AMRO-88,90,92,93, Field Office) (1956: AMRO-1,17,18,35,45,49,50, AMRO-60,62,64,76,85,86,88, AMRO-90,93,94, Field Office) (1957: AMRO-1,17,18,26,35,45,46, AMRO-48,50,60,62,64,67,75, AMRO-76,85,86,88,90,92,93, AMRO-94, Field Office)	
			104,582	218,998	247,110				223,336	215,376	277,098		
			104,582	218,998	247,110				223,336	215,376	277,098	<u>TOTAL - FIELD ACTIVITIES ADMINISTERED BY HEADQUARTERS - WASHINGTON</u>	
			995,842	1,056,968	1,063,463				614,364	642,573	763,734	TOTAL OPERATIONS - ALL ZONES	
									(9,539)	(2,158)		Less: Delay in implementation of new WHO Projects	
									614,364	633,034	761,576		

PAN AMERICAN SANITARY BUREAU			WORLD HEALTH ORGANIZATION			SUMMARY OF PROFESSIONAL AND LOCAL PERSONNEL
NUMBER OF POSTS			NUMBER OF POSTS			
1955	1956	1957	1955	1956	1957	
						PART I
						PAN AMERICAN SANITARY ORGANIZATION
9 5	9 5	9 5	2 1	2 1	2 1	Professional Local
14	14	14	3	3	3	Total - PART I
						PART II
						PAN AMERICAN SANITARY BUREAU - HEADQUARTERS
50 71	49 71	50 72	28 23	28 23	28 23	Professional Local
121	120	122	51	51	51	Total - PART II
						PART III
						PAN AMERICAN SANITARY BUREAU - FIELD AND OTHER PROGRAMS
						<u>Zone Offices</u>
23 52	22 52	22 52	5	5	5	Professional Local
75	74	74	5	5	5	Total - Zone Offices
						<u>Projects</u>
33 3	35 10	29 10	26	34	32	Professional Local
36	45	39	26	34	32	Total - Projects
						Total - Zone Offices and Projects - Part III
56 55	57 62	51 62	31	39	37	Professional Local
111	119	113	31	39	37	Total - PART III
						ALL PARTS
115 131	115 138	110 139	61 24	69 24	67 24	Professional Local
246	253	249	85	93	91	Total - PERSONNEL

U. N. TECHNICAL ASSISTANCE			OTHER EXTRA BUDGETARY FUNDS			TOTALS		
NUMBER OF POSTS			NUMBER OF POSTS			NUMBER OF POSTS		
1955	1956	1957	1955	1956	1957	1955	1956	1957
1	1	1				12 6	12 6	12 6
1	1	1				18	18	18
1 11	1 11	1 11	1 1	1 1		80 106	79 106	79 106
12	12	12	2	2		186	185	185
						28 52	27 52	27 52
						80	79	79
84 3	100	105	20 77	18 72	15 72	163 83	187 82	181 82
87	100	105	97	90	87	246	269	263
84 3	100	105	20 77	18 72	15 72	191 135	214 134	208 134
87	100	105	97	90	87	326	348	342
86 14	102 11	107 11	21 78	19 73	15 72	283 247	305 246	299 246
100	113	118	99	92	87	530	551	545

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART I		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			CONFERENCE SERVICES AND ORGANIZATIONAL MEETINGS		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	8,167	8,417	8,667							SECTION 1		
1	1	1	3,488	3,628	3,768							CONFERENCE SERVICES (For text see page 9)		
												Chief of Office, .12		
												Secretary, .16		
												Conference Personnel		
1	1	1	5,600	5,800	6,000							Planning Officer, .13		
1	1	1	5,000	5,000	5,000							Documents Officer, .14		
1	1	1	4,317	4,517	4,717							Administrative Assistant, .15		
1	1	1	3,745	3,885	4,025							Clerk Stenographer, .17		
1	1	1	3,128	3,258	3,388							Clerk Stenographer, .232		
1	1	1	3,204	3,334	3,464							Clerk Typist, .18		
												Translation		
1	1	1	6,367	6,587	6,812							Reviser Translator, .19		
4	4	4	21,451	22,251	23,051	2	2	2	10,217	10,617	11,017	Translator, .20, .21, .22, .23, 4.24, 4.25, 4.26		
1	1	1	3,128	3,258	3,388	1	1	1	4,307	4,467	4,560	Clerk, 4.27		
			3,819	3,943	4,069				766	796	827	Clerk Stenographer, .28		
14	14	14	71,414	73,878	76,349	3	3	3	15,290	15,880	16,404	Cost-of-Living Adjustment		
												TOTAL		
												SECTION 2		
												ORGANIZATIONAL MEETINGS (For text see page 9)		
												Ch. 1. Meetings of the Directing Council, Executive Committee and WHO Regional Committee		
			10,400	14,267	10,400				4,000	5,707	4,000	Personal Services		
			1,589	22,252	1,589				611	8,901	611	Travel and Transportation		
			2,167	2,714	2,167				833	1,086	833	Space and Equipment Services		
			722	3,143	722				278	1,257	278	Other Services		
			5,611	7,586	5,611				1,389	1,914	1,389	Supplies and Materials		
			20,489	49,962	20,489				7,111	18,865	7,111	TOTAL		
												Ch. 2. Meetings of the Executive Committee		
			6,365	6,365	6,365							Personal Services		
			8,645	8,645	8,645							Travel and Transportation		
			76	76	76							Space and Equipment Services		
			1,026	1,026	1,026							Other Services		
			2,888	2,888	2,888							Supplies and Materials		
			19,000	19,000	19,000							TOTAL		
												SECTION 3		
												COMMON STAFF COSTS (For text see page 9)		
			1,800	1,800	1,600				200	200	200	Ch. 1. Dependents' Allowance		
			1,194	1,312	780				200	200	200	Ch. 2. Repatriation Grant		
			9,461	9,789	10,118				2,033	2,111	2,182	Ch. 3. Pension		
			676	700	724				146	152	156	Ch. 4. Insurance		
			1,700	4,200	1,700					3,875		Ch. 5. Home Leave Travel		
			8,415	8,836	9,278				520	546	574	Ch. 6. Recruitment Travel		
												Ch. 7. Reimbursement of Income Tax		
			23,246	26,637	24,200				3,099	7,084	3,312	TOTAL		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	8,167	8,417	8,667
												1	1	1	3,488	3,628	3,768
												1	1	1	5,600	5,800	6,000
												1	1	1	5,000	5,000	5,000
												1	1	1	4,317	4,517	4,717
												1	1	1	3,745	3,885	4,025
												1	1	1	3,128	3,258	3,388
												1	1	1	3,204	3,334	3,464
												1	1	1	6,367	6,587	6,812
1	1	1	5,000	5,200	5,400							7	7	7	36,668	38,068	39,468
												1	1	1	4,307	4,467	4,560
												1	1	1	3,128	3,258	3,388
			375	390	405										4,960	5,129	5,301
1	1	1	5,375	5,590	5,805							18	18	18	92,079	95,348	98,558
															14,400	19,974	14,400
															2,200	31,153	2,200
															3,000	3,800	3,000
															1,000	4,400	1,000
															7,000	9,500	7,000
															27,600	68,827	27,600
															6,365	6,365	6,365
															8,645	8,645	8,645
															76	76	76
															1,026	1,026	1,026
															2,888	2,888	2,888
															19,000	19,000	19,000
															2,000	2,000	1,800
			100	100	100										1,494	1,612	1,080
			700	728	756										12,194	12,628	13,056
			50	52	54										872	904	934
															1,700	8,075	1,700
			1,329	1,395	1,465										10,264	10,777	11,317
			2,179	2,275	2,375										28,524	35,996	29,887

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II HEADQUARTERS	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$		
1	1	1	16,000	16,000	16,000							SECTION 1 EXECUTIVE OFFICES (For text see page 9) <u>Ch. 1. Office of the Director</u> Director, .1 Assistant Director, .2 Secretary General, .3 Medical Adviser, 4.653 Consultant, .242 Reports Officer, .5, .255 Administrative Assistant, .6 Secretary, .7, .8 Clerk Stenographer, .9, .10 Clerk Typist, .11 Contribution of WHO to Director's Salary Cost-of-Living Adjustment Cost of Posts Consultants' Fees Duty Travel for Executive Offices Duty Travel for Medical Adviser to UNICEF Representation Allowance of the Director	
1	1	1	15,000	15,000	15,000								
1	1	1	14,000	14,000	14,000	1	1	1	9,396	9,675	9,975		Ung Ung Ung P5 Ung P1 P1 WL8 WL6 WL5
1	1	1	8,400	8,400	8,400								
2	2	2	7,050	8,717	8,917								
1	1	1	5,000	5,000	5,000								
2	2	2	8,950	9,310	9,490								
2	2	2	7,035	7,315	7,595								
1	1	1	3,616	3,746	3,800								
			(15,000)	(15,000)	(15,000)				15,000	15,000	15,000		
			3,079	3,204	3,219								
			73,130	75,692	76,421				24,396	24,675	24,975		
			6,000	6,000	6,000				7,000	7,000	7,000		
			5,000	5,000	5,000				2,500	2,500	2,500		
			6,000	6,000	6,000								
12	12	12	90,130	92,692	93,421	1	1	1	33,896	34,175	34,475	TOTAL	
												<u>Ch. 2. Office of Public Information</u> Chief of Office, 4.29 Information Officer, 4.30 Secretary, .31 Clerk Typist, .32 Cost-of-Living Adjustment Cost of Posts Newsletters Press Releases Exhibits World Health Day Miscellaneous	
1	1	1	3,162	3,302	3,442	1	1	1	7,958	8,000	8,000		P3
1	1	1	3,258	3,388	3,518	1	1	1	3,600	3,800	4,000		P1 WL6 WL5
									867	885	900		
			6,420	6,690	6,960				12,425	12,685	12,900		
									22,260	22,660	22,660		
			5,310	5,310	5,310				5,310	5,310	5,310		
			3,150	3,150	3,150				3,150	3,150	3,150		
									5,000	5,000	5,000		
			540	540	540				540	540	540		
2	2	2	15,420	15,690	15,960	2	2	2	49,085	49,345	49,560	TOTAL	
												<u>Ch. 3. Office of Coordination</u> Chief of Office, 4.33 Administrative Assistant, .34 Administrative Assistant, 4.35 Secretary, 4.36 Clerk Stenographer, 4.117 Cost-of-Living Adjustment	
1	1	1	5,800	6,000	6,200	1	1	1	9,500	9,500	9,500		P4
						1	1	1	4,133	4,333	4,533		P2
						1	1	1	3,593	3,733	3,873		P1
						1	1	1	3,687	3,827	3,967		WL6 WL6
			435	450	465				1,023	1,038	1,053		
1	1	1	6,235	6,450	6,665	4	4	4	21,936	22,431	22,926	TOTAL	

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	16,000	16,000	16,000
												1	1	1	15,000	15,000	15,000
												1	1	1	14,000	14,000	14,000
												1	1	1	9,396	9,675	9,975
												1	1	1	8,400	8,400	8,400
												2	2	2	7,050	8,717	8,917
												1	1	1	5,000	5,000	5,000
												2	2	2	8,950	9,310	9,490
												2	2	2	7,035	7,315	7,595
												1	1	1	3,616	3,746	3,800
															3,079	3,204	3,219
															97,526	100,367	101,396
			1,300	1,500	1,500										6,000	6,000	6,000
															13,300	13,500	13,500
															2,500	2,500	2,500
															6,000	6,000	6,000
			1,300	1,500	1,500							13	13	13	125,326	128,367	129,396
												1	1	1	7,958	8,000	8,000
												1	1	1	3,600	3,800	4,000
												1	1	1	3,162	3,302	3,442
												1	1	1	3,258	3,388	3,518
															867	885	900
															18,845	19,375	19,860
															22,260	22,660	22,660
			500	500	500										11,120	11,120	11,120
			500	500	500										6,800	6,800	6,800
															5,000	5,000	5,000
			350	350	350										1,430	1,430	1,430
			1,350	1,350	1,350							4	4	4	65,855	66,385	66,870
												1	1	1	9,500	9,500	9,500
												1	1	1	5,800	6,000	6,200
												1	1	1	4,133	4,333	4,533
												1	1	1	3,593	3,733	3,873
												1	1	1	3,687	3,827	3,967
															1,458	1,488	1,518
												5	5	5	28,171	28,881	29,591

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			HEADQUARTERS		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	7,525	7,750	8,000	1	1	1	5,000	5,000	5,000	Ch. 4. <u>Library</u>		P3
1	1	1	3,570	3,710	3,850							Chief of Section, .37		P1
2	2	2	7,910	8,190	8,260							Cataloger, 4.38		WL6
1	1	1	3,063	3,193	3,323							Clerk Stenographer, .39		WL6
1	1	1	2,760	2,875	2,990							Clerk, .40, .41		WL5
			564	581	600				375	375	375	Clerk Typist, .42		WL4
			25,392	26,299	27,023				5,375	5,375	5,375	Clerk, .43		
			4,750	4,750	4,750							Cost-of-Living Adjustment		
												Cost of Posts		
												Library Acquisitions and Binding		
6	6	6	30,142	31,049	31,773	1	1	1	5,375	5,375	5,375	TOTAL		
												Ch. 5. <u>Editorial</u>		
1	1	1	8,167	8,417	8,667	1	1	1	5,183	5,383	5,583	Chief of Office, .44		P4
2	2	2	10,067	10,467	10,867							Editor, 4.45, .46, .47		P2
3	3	3	13,416	13,816	14,216							Sub-Editor, .48, .49, .50		P1
1	1	1	4,160	4,340	4,520							Clerk, .51		WL8
1	1	1	3,488	3,628	3,768							Clerk Stenographer, .52		WL6
3	3	3	9,525	9,916	10,306							Clerk Stenographer, .53, .54, .55		WL5
			2,375	2,453	2,532				389	404	419	Cost-of-Living Adjustment		
11	11	11	51,198	53,037	54,876	1	1	1	5,572	5,787	6,002	TOTAL		
												SECTION 2		
												DIVISION OF EDUCATION AND TRAINING (For text see page 9)		
												Ch. 1. <u>Office of the Chief</u>		
1	1	1	4,360	4,520	4,560	1	1	1	11,400	11,633	11,800	Chief of Division, 4.56		D2
1	1	1	2,890	3,020	3,150	1	1	1	8,667	8,917	9,167	Administrative Officer, 4.57		P4
												Secretary, .58		WL7
												Clerk Stenographer, .59		WL5
									1,505	1,541	1,573	Cost-of-Living Adjustment		
			7,250	7,540	7,710				21,572	22,091	22,540	Cost of Posts		
			6,000	6,000	6,000				5,000	5,000	5,000	Duty Travel for Division		
2	2	2	13,250	13,540	13,710	2	2	2	26,572	27,091	27,540	TOTAL		
												Ch. 2. <u>Fellowships Branch</u>		
1	1	1	7,337	7,562	7,792	1	1	1	9,875	10,175	10,475	Chief of Branch, 4.69		P5
1	1	1	6,000	6,200	6,400							Medical Officer, .61		P4
						1	1	1	4,767	4,967	5,000	Nurse, .234		P3
						1	1	1	3,255	3,395	3,535	Administrative Assistant, 4.62		P1
1	1	1	3,208	3,348	3,488	2	2	2	6,813	7,093	7,373	Secretary, 4.63		WL6
1	1	1	3,713	3,800	3,800							Clerk, 4.64, 4.65, .243		WL6
												Clerk Typist, .66		WL5
												Clerk Stenographer, 4.254		WL5
			1,000	1,032	1,064				1,099	1,136	1,161	Cost-of-Living Adjustment		
4	4	4	21,258	21,942	22,544	5	5	5	25,809	26,766	27,544	TOTAL		
												Ch. 3. <u>Professional Education Branch</u>		
1	1	1	8,750	9,000	9,250	1	1	1	7,300	7,525	7,750	Chief of Branch, .67		P5
1	1	1	7,958	8,208	8,458							Medical Officer, 4.235		P4
1	1	1	3,372	3,512	3,652							Nurse Educator, .68		P4
1	1	1	3,150	3,290	3,430							Secretary, .71		WL6
1	1	1	3,955	4,095	4,130							Clerk, .231		WL6
												Clerk Stenographer, .70		WL5
			1,253	1,291	1,328				548	564	581	Cost-of-Living Adjustment		
5	5	5	28,438	29,396	30,248	1	1	1	7,848	8,089	8,331	TOTAL		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	7,525	7,750	8,000
												1	1	1	5,000	5,000	5,000
												1	1	1	3,570	3,710	3,850
												2	2	2	7,910	8,190	8,260
												1	1	1	3,063	3,193	3,323
												1	1	1	2,760	2,875	2,990
															939	956	975
															30,767	31,674	32,398
															4,750	4,750	4,750
												7	7	7	35,517	36,424	37,148
															8,167	8,417	8,667
															15,250	15,850	16,450
															13,416	13,816	14,216
															4,160	4,340	4,520
															3,488	3,628	3,768
															9,525	9,916	10,306
															2,764	2,857	2,951
												12	12	12	56,770	58,824	60,878
												1	1	1	11,400	11,633	11,800
												1	1	1	8,667	8,917	9,167
												1	1	1	4,360	4,520	4,560
												1	1	1	2,890	3,020	3,150
															1,505	1,541	1,573
															28,822	29,631	30,250
			1,000	1,000	1,000										12,000	12,000	12,000
			1,000	1,000	1,000												
												4	4	4	40,822	41,631	42,250
												1	1	1	9,875	10,175	10,475
												1	1	1	7,337	7,562	7,792
												1	1	1	6,000	6,200	6,400
												1	1	1	4,767	4,967	5,000
												1	1	1	3,255	3,395	3,535
												3	3	3	10,021	10,441	10,861
												1	1	1	3,713	3,800	3,800
1	1	1	1,687	2,966	3,096							1	1	1	1,687	2,966	3,096
															2,099	2,168	2,225
1	1	1	1,687	2,966	3,096							10	10	10	48,754	51,674	53,184
												1	1	1	8,750	9,000	9,250
												1	1	1	7,300	7,525	7,750
												1	1	1	7,958	8,208	8,458
												1	1	1	3,372	3,512	3,652
												1	1	1	3,150	3,290	3,430
												1	1	1	3,955	4,095	4,130
															1,801	1,855	1,909
												6	6	6	36,286	37,485	38,579

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II HEADQUARTERS		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	11,667	11,800	12,067							SECTION 3		
1	1	1	4,187	4,347	4,507							DIVISION OF ADMINISTRATION (For text see page 10)		
			875	885	905							Ch. 1. <u>Office of the Chief</u>		
			16,729	17,032	17,479							Chief of Division, .112		D2
			5,000	5,000	5,000				1,300	1,300	1,300	Secretary, .114		WL7
												Cost-of-Living Adjustment		
												Cost of Posts		
												Duty Travel for Division		
2	2	2	21,729	22,032	22,479				1,300	1,300	1,300	TOTAL		
1	1	1	8,400	7,300	7,525							Ch. 2. <u>Supply Office</u>		
1			5,834									Chief of Office, .119		P4
1	1	1	6,700	6,700	6,700	1	1	1	4,634	4,967	5,167	Buyer, .122		P3
1	1	1	5,000	5,000	5,000							Buyer, .121		P2
1	1	1	4,133	4,367	4,567							Specifications Officer, .120		P2
1	1	1				1	1	1	3,480	3,800	3,980	Translator, .136		P1
1	1	1	4,093	4,253	4,413							Special Services Officer, .123		P1
2	2	2	6,918	7,198	7,478							Senior Supply Clerk, .4.124, .4.134		WL8
												Junior Supply Clerk, .137		WL7
												Clerk, .125, .129		WL6
1	1	1	2,890	3,020	3,150	1	1	1	3,085	3,215	3,345	Clerk Stenographer, .4.131, .4.132, .4.128		WL5
						1	1	1	2,722	2,837	2,952	Clerk, .253		WL5
			1,578	1,754	1,784				348	373	388	Clerk Typist, .4.130		WL4
												Cost-of-Living Adjustment		
9	8	8	45,546	39,592	40,617	4	4	4	14,269	15,192	15,832	TOTAL		
1	1	1	5,667	6,133	6,333	1	1	1	9,375	9,650	9,950	Ch. 3. <u>Administrative Management and Personnel Branch</u>		
2	2	2	10,000	10,400	10,800							Chief of Branch, .4.138		P5
1	1	1	3,520	3,700	3,900							Personnel Officer, .148		P3
1	1	1	4,421	4,745	4,880	1	1	1	4,065	4,385	4,565	Administrative Analyst, .141, .236		P2
1	1	1	3,675	3,815	3,955							Recruitment Officer, .4.145		P2
						1	1	1	3,943	4,083	4,130	Personnel Technician, .150		P1
						1	1	1	2,674	2,789	2,904	Personnel Technician, .241, .4.146		WL8
			1,310	1,518	1,578				703	724	747	Secretary, .139		WL6
												Clerk, .4.142		WL6
						1	1	1				Clerk, .4.144		WL5
												Clerk, .4.218		WL4
6	6	6	28,593	30,311	31,446	4	4	4	20,760	21,631	22,296	Cost-of-Living Adjustment		
1	1	1	8,875	9,125	9,375	1	1	1	6,067	6,267	6,475	Ch. 4. <u>Budget and Finance Branch</u>		
2	2	2	10,133	10,533	10,933	1	1	1	6,333	6,550	6,775	Chief of Branch, .152		P5
1	1	1	4,233	4,800	5,000							Finance Officer, .4.160		P3
2	2	2	9,816	10,383	10,783							Budget Officer, .4.153		P3
1	1	1	4,183	4,383	4,583							Budget Analyst, .154, .155		P2
2	2	2	7,840	8,200	8,560	3	3	3	12,567	13,167	13,700	Disbursement Officer, .250		P2
												Senior Accountant, .177, .170		
1	1	1	4,183	4,383	4,583							Junior Accountant, .165, .4.164, .4.171, .4.172		P1
2	2	2	7,840	8,200	8,560							Senior Accounting Clerk, .179, .233		WL8
1	1	1	3,440	3,600	3,760	1	1	1	3,680	3,840	4,000	Junior Accounting Clerk, .163, .4.166, .4.180		WL7
1	1	1	3,150	3,290	3,430	2	2	2	6,872	7,152	7,432	Clerk, .4.174, .4.182		WL6
1	1	1	3,920	3,990	3,990							Secretary, .162		WL6
2	2	2	6,744	7,004	7,264							Clerk Stenographer, .157		WL6
			2,793	2,942	3,051				1,873	1,948	2,021	Clerk, .167, .168, .4.169, .4.176		WL5
												Cost-of-Living Adjustment		
14	14	14	65,127	68,250	70,729	8	8	8	37,392	38,924	40,403	TOTAL		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	11,667	11,800	12,067
												1	1	1	4,187	4,347	4,507
															875	885	905
															16,729	17,032	17,479
															6,300	6,300	6,300
												2	2	2	23,029	23,332	23,779
												1	1	1	8,400	7,300	7,525
												1	1	1	5,834		
												1	1	1	4,634	4,967	5,167
												1	1	1	6,700	6,700	6,700
												1	1	1	5,000	5,000	5,000
												1	1	1	4,133	4,367	4,567
1	1	1	3,558	3,750	3,935							2	2	2	7,038	7,550	7,915
												1	1	1	4,093	4,253	4,413
												2	2	2	6,918	7,198	7,478
2	2	2	6,668	6,928	7,188							3	3	3	9,753	10,143	10,533
												1	1	1	2,890	3,020	3,150
												1	1	1	2,722	2,837	2,952
															1,926	2,127	2,172
3	3	3	10,226	10,678	11,123							16	15	15	70,041	65,462	67,572
												1	1	1	9,375	9,650	9,950
												1	1	1	5,667	6,133	6,333
												2	2	2	10,000	10,400	10,800
1	1	1	5,267	5,467	5,667							1	1	1	5,267	5,467	5,667
												1	1	1	3,520	3,700	3,900
												2	2	2	8,486	9,130	9,445
												1	1	1	3,675	3,815	3,955
1	1	1	3,172	3,302	3,432							1	1	1	3,943	4,083	4,130
												1	1	1	3,172	3,302	3,432
												1	1	1	2,674	2,789	2,904
			395	410	425										2,408	2,652	2,750
2	2	2	8,834	9,179	9,524							12	12	12	58,187	61,121	63,266
												1	1	1	8,875	9,125	9,375
												1	1	1	6,067	6,267	6,475
												1	1	1	6,333	6,550	6,775
												2	2	2	10,133	10,533	10,933
												1	1	1	4,233	4,800	5,000
												2	2	2	9,816	10,383	10,783
												4	4	4	16,750	17,550	18,283
												2	2	2	7,840	8,200	8,560
1	1	1	3,442	3,582	3,920							3	3	3	10,562	11,022	11,680
												2	2	2	6,872	7,152	7,432
												1	1	1	3,150	3,290	3,430
2	2	2	5,986	6,246	6,506							1	1	1	3,920	3,990	3,990
												4	4	4	12,730	13,250	13,770
															4,666	4,890	5,072
3	3	3	9,428	9,828	10,426							25	25	25	111,947	117,002	121,558

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II HEADQUARTERS		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	7,712	7,958	8,208							Ch. 5. <u>General Services Office</u>		
1	1	1	3,523	3,663	3,803							Chief of Office, .184 Secretary, .186		P4 WL6
												<u>Travel</u>		
1	1	1	3,760	3,920	4,080	1	1	1	4,283	4,483	4,683	Travel Officer, 4.187		P1
						1	1	1	2,890	3,020	3,150	Clerk, .188 Clerk Stenographer, 4.189		WL7 WL5
												<u>Records and Communications</u>		
1	1	1	3,983	4,183	4,383							Records and Communications Officer, .191		P1
2	2	2	7,396	7,676	7,956	1	1	1	3,442	3,582	3,722	Clerk, .192, .193, 4.194		WL6
1	1	1	3,258	3,388	3,518							Clerk, .195, 4.196, 4.198		WL5
1	1	1	2,847	2,962	3,077							Clerk, .200		WL4
												<u>Printing</u>		
1	1	1	3,440	3,600	3,760	1	1	1	4,600	4,800	5,000	Printing Officer, 4.201		P1
1	1	1	4,095	4,130	4,130							Printing Technician, .202		WL7
												Clerk, .203		WL6
1	1	1	2,966	3,096	3,226							Machine Operator, 4.204		WL5
												Collator, .208		WL5
												<u>Property Services</u>		
1	1	1	4,880	4,880	4,880	1	1	1	5,333	5,533	5,733	Property Officer, 4.215		P2
2	2	2	6,452	6,732	7,012							Technician, .217		WL8
1	1	1	4,072	4,130	4,130							Clerk, .216, .219		WL6
1	1	1	3,269	3,399	3,529							Switchboard Supervisor, .220		WL5
1	1	1	3,020	3,150	3,280							Switchboard Operator, .221		WL5
1	1	1	2,828	2,943	3,058							Clerk, .223		WL5
						1	1	1	2,770	2,885	3,000	Clerk, .244		WL4
1	1	1	2,435	2,525	2,615							Mail Clerk, 4.224		WL4
1	1	1	2,915	2,915	2,915							Chauffeur Laborer, .227		WL3
												Handy Man, .225		WL3
												<u>Visual Aids</u>		
1	1	1	7,075	7,300	7,525							Visual Aids Officer, .209		P3
1	1	1	5,000	5,000	5,000							Technician, .210		P1
3	3	3	11,640	12,210	12,750							Draftsman, .211, .212, .213		WL8
1	1	1	3,193	3,323	3,453							Clerk Stenographer, .214		WL5
			1,783	1,834	1,885				1,066	1,111	1,156	Cost-of-Living Adjustment		
26	26	26	101,542	104,917	108,173	6	6	6	24,384	25,444	26,444	TOTAL		
SECTION 4														
DIVISION OF PUBLIC HEALTH (For text see page 10)														
Ch. 1. <u>Office of the Chief</u>														
1	1	1	11,000	11,267	11,400							Chief of Division, .72		D2
1	1	1	4,133	4,293	4,453							Secretary, .73		WL7
1	1	1	3,407	3,547	3,687							Clerk Stenographer, .74		WL5
			825	845	855							Cost-of-Living Adjustment		
			19,365	19,952	20,395							Cost of Posts		
			14,000	14,000	14,000				14,000	14,000	14,000	Duty Travel for Division		
3	3	3	33,365	33,952	34,395				14,000	14,000	14,000	TOTAL		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	7,712	7,958	8,208
												1	1	1	3,523	3,663	3,803
												1	1	1	4,283	4,483	4,683
												1	1	1	3,760	3,920	4,080
												1	1	1	2,890	3,020	3,150
												1	1	1	3,983	4,183	4,383
2	2	2	6,420	6,680	6,940							3	3	3	10,838	11,258	11,678
												3	3	3	9,678	10,068	10,458
												1	1	1	2,847	2,962	3,077
												1	1	1	4,600	4,800	5,000
												1	1	1	3,440	3,600	3,760
1	1	1	3,096	3,226	3,356							1	1	1	4,095	4,130	4,130
												1	1	1	3,096	3,226	3,356
												1	1	1	2,966	3,096	3,226
												1	1	1	5,333	5,533	5,733
												1	1	1	4,880	4,880	4,880
												2	2	2	6,452	6,732	7,012
												1	1	1	4,072	4,130	4,130
												1	1	1	3,269	3,399	3,529
												1	1	1	3,020	3,150	3,280
												1	1	1	2,828	2,943	3,058
												1	1	1	2,770	2,885	3,000
												1	1	1	2,435	2,525	2,615
												1	1	1	2,915	2,915	2,915
												1	1	1	7,075	7,300	7,525
												1	1	1	5,000	5,000	5,000
												3	3	3	11,640	12,210	12,750
												1	1	1	3,193	3,323	3,453
															2,849	2,945	3,041
3	3	3	9,516	9,906	10,296							35	35	35	135,442	140,237	144,913
												1	1	1	11,000	11,267	11,400
												1	1	1	4,133	4,293	4,453
												1	1	1	3,407	3,547	3,687
															825	845	855
															19,365	19,952	20,395
			1,000	2,000	2,000				2,380	4,388	3,508				31,380	34,388	33,508
			1,000	2,000	2,000				2,380	4,388	3,508	3	3	3	50,745	54,340	53,903

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II HEADQUARTERS		GRADE	
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES						
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957				
			\$	\$	\$				\$	\$	\$				
1	1	1	9,167	9,417	9,700	1	1	1	9,500	9,500	9,500	Ch. 2. <u>Health Promotion Branch</u>		P5 Ph Ph Ph WL6 WL5	
		1			4,521	1	1	1	7,694	7,938	8,188	Chief of Branch, .75			
1	1	1	3,605	3,745	3,885							Medical Officer, 4.79			
		1			1,838	2	2	2	6,636	6,885	7,015	Public Health Nurse, 4.77			
			688	707	1,067				1,290	1,308	1,327	Dental Officer, .237			
												Secretary, .82			
												Clerk Stenographer, 4.83, 4.92, .238			
												Cost-of-Living Adjustment			
2	2	4	13,460	13,869	21,011	4	4	4	25,120	25,631	26,030	TOTAL			
1	1	1	9,396	9,675	9,975	2	2	2	15,112	15,587	16,062	Ch. 3. <u>Communicable Diseases Branch</u>		P5 Ph Ph WL6 WL5	
1	1	1	9,250	9,500	9,500							Chief of Branch, .86			
1	1	1	3,150	3,290	3,430	1	1	1	3,172	3,302	3,432	Medical Officer, 4.89, 4.239			
2	2	2	7,113	7,383	7,653							Veterinarian, .88			
												Secretary, .91			
												Clerk Stenographer, .93, .95, 4.84			
1	1	1	7,731	7,979	8,229							<u>Epidemiological and Statistical Section</u>		Ph P3 P2 P1 WL8 WL5	
1	1	1	6,000	6,200	6,400	1	1	1	5,583	5,783	5,983	Technical Officer, .96			
1	1	1	6,200	6,400	6,400							Statistician, .97			
2	2	2	9,933	10,000	10,000	1	1	1	3,920	4,100	4,280	Statistician, .98, 4.99			
1	1	1	3,860	4,040	4,220	1	1	1	3,675	3,815	3,955	Statistician, .100, .101			
2	2	2	6,798	7,058	7,188							Technical Assistant, .102, 4.103			
												Clerk Stenographer, .104, .105, 4.106			
			3,639	3,732	3,788				1,553	1,604	1,654	Cost-of-Living Adjustment			
13	13	13	73,070	75,257	76,783	6	6	6	33,015	34,191	35,366	TOTAL			
1	1	1	7,938	8,188	8,438	1	1	1	9,333	9,600	9,900	Ch. 4. <u>Environmental Sanitation Branch</u>		P5 Ph WL6 WL5	
						1	1	1	3,243	3,383	3,523	Chief of Branch, 4.107			
2	2	2	6,529	6,799	7,069							Public Health Engineer, .245			
												Secretary, 4.111			
			595	614	633				700	720	743	Clerk Stenographer, .110, .246			
												Cost-of-Living Adjustment			
3	3	3	15,062	15,601	16,140	2	2	2	13,276	13,703	14,166	TOTAL			
SECTION 5 COMMON STAFF COSTS (For text see page 11)															
			13,000	13,000	13,434				5,650	5,650	5,650	Ch. 1. Dependents' Allowance			
			9,052	6,763	5,881				2,800	2,800	2,800	Ch. 2. Repatriation Grant			
			78,157	81,143	84,286				39,176	40,444	41,593	Ch. 3. Pension Fund			
			5,759	5,832	6,104				2,797	2,887	2,968	Ch. 4. Staff Insurance			
			10,330	19,990	13,630					5,330	2,300	Ch. 5. Home Leave Travel			
			11,700						3,300			Ch. 6. Recruitment Travel			
			56,085	58,889	61,833				45,968	48,024	50,785	Ch. 7. Reimbursement of Income Tax			
			184,083	185,617	185,168				99,691	105,135	106,096	TOTAL			

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	9,167	9,417	9,700
												1	1	1	9,500	9,500	9,500
												1	1	1	7,694	7,938	8,188
						1	1		4,238	7,431	3,135	1	1	1	4,238	7,431	7,656
						1	1		1,686	2,966	1,258	1	1	1	3,605	3,745	3,885
									318	557	235	3	3	3	8,322	9,851	10,111
															2,296	2,572	2,629
						2	2		6,242	10,954	4,628	8	8	8	44,822	50,454	51,669
												1	1	1	9,396	9,675	9,975
												2	2	2	15,112	15,587	16,062
												1	1	1	9,250	9,500	9,500
												1	1	1	3,150	3,290	3,430
												3	3	3	10,285	10,685	11,085
												1	1	1	7,731	7,979	8,229
												1	1	1	6,000	6,200	6,400
												2	2	2	11,783	12,183	12,383
												2	2	2	9,933	10,000	10,000
												2	2	2	7,780	8,140	8,500
												3	3	3	10,473	10,873	11,143
															5,192	5,336	5,442
												19	19	19	106,085	109,448	112,149
												1	1	1	9,333	9,600	9,900
												1	1	1	7,938	8,188	8,438
												1	1	1	3,243	3,383	3,523
												2	2	2	6,529	6,799	7,069
															1,295	1,334	1,376
												5	5	5	28,338	29,304	30,306
			600	600	600				434	800	366				19,684	20,050	20,050
			100	100	100						1,160				11,952	9,663	9,941
			5,501	5,903	6,166				829	1,454	615				123,663	128,944	132,660
			393	422	438				60	104	44				9,009	9,245	9,554
											3,512				10,330	25,320	19,442
															15,000		
			2,824	2,975	3,124				400	518	243				105,277	110,406	115,985
			9,418	10,000	10,428				1,723	2,876	5,940				294,915	303,628	307,632

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART II HEADQUARTERS		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	SECTION 6 COMMON SERVICES - HEADQUARTERS (For text see page 11) <u>Ch. 1. Space and Equipment Services</u> Contracted Custodial Services Fuel Electricity Gas Water Elevator Maintenance Trash Removal-Extermination Janitorial Supplies Buildings, Repairs and Upkeep Equipment, Repair and Maintenance		
			\$	\$	\$				\$	\$	\$			
			16,000	16,000	16,000				5,680	5,680	5,680			
			1,467	1,467	1,467				520	520	520			
			4,000	4,200	4,200				1,420	1,492	1,492			
			267	267	267				94	94	94			
			400	400	400				142	142	142			
			667	467	467				237	165	165			
			413	413	413				147	147	147			
			1,000	1,000	1,000				355	355	355			
			1,267	1,267	1,267				450	450	450			
			1,400	1,400	1,400				497	497	497			
			26,881	26,881	26,881				9,542	9,542	9,542	TOTAL		
												<u>Ch. 2. Other Services</u>		
												<u>Communications</u>		
			7,000	7,000	7,000				4,500	4,500	4,500	* Postage		
			4,040	4,040	4,040				3,920	3,920	3,920	* Cables		
			1,360	1,360	1,360				1,590	1,590	1,590	* Telephone Toll Charges		
			6,530	6,530	6,530				2,320	2,320	2,320	Telephone Service Charges		
			200	200	200				1,000	1,000	1,000	* Hospitality		
												<u>Other Contractual Services</u>		
			4,000	4,000	4,000				480	480	480	* Audit Costs		
			1,320	1,320	1,320				310	310	310	* Medical Examinations		
			870	870	870				120	120	120	Miscellaneous		
			330	330	330							Sampling, Testing, Catalogs		
												<u>Local Transportation</u>		
			600	600	600				210	210	210	Vehicle Operation		
			260	260	260				100	100	100	Miscellaneous		
			26,510	26,510	26,510				14,550	14,550	14,550	TOTAL		
												<u>Ch. 3. Supplies and Materials</u>		
			4,767	4,767	4,767				1,690	1,690	1,690	Office Supplies		
			5,000	5,000	5,000				1,775	1,775	1,775	Printing Supplies		
			5,000	5,000	5,000				1,775	1,775	1,775	Contract Printing		
			533	533	533				190	190	190	Photographic Work		
			15,300	15,300	15,300				5,430	5,430	5,430	TOTAL		
												<u>Ch. 4. Fixed Charges and Claims</u>		
			3,670	3,670	3,670				1,300	1,300	1,300	Insurance - Non-Staff		
												<u>Ch. 5. Acquisition of Capital Assets</u>		
			1,500	1,500	1,500				1,500	1,500	1,500	* Equipment		
												<u>SUMMARY</u>		
			26,881	26,881	26,881				9,542	9,542	9,542	Ch. 1. Space and Equipment Services		
			26,510	26,510	26,510				14,550	14,550	14,550	Ch. 2. Other Services		
			15,300	15,300	15,300				5,430	5,430	5,430	Ch. 3. Supplies and Materials		
			3,670	3,670	3,670				1,300	1,300	1,300	Ch. 4. Fixed Charges and Claims		
			1,500	1,500	1,500				1,500	1,500	1,500	Ch. 5. Acquisition of Capital Assets		
			73,861	73,861	73,861				32,322	32,322	32,322	TOTAL		

* Direct Charges

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			2,320	2,320	2,320										24,000	24,000	24,000
			213	213	213										2,200	2,200	2,200
			580	608	608										6,000	6,300	6,300
			39	39	39										400	400	400
			58	58	58										600	600	600
			96	68	68										1,000	700	700
			60	60	60										620	620	620
			145	145	145										1,500	1,500	1,500
			183	183	183										1,900	1,900	1,900
			203	203	203										2,100	2,100	2,100
			3,897	3,897	3,897										40,320	40,320	40,320
			1,140	1,140	1,140										11,500	11,500	11,500
			50	50	50										9,100	9,100	9,100
			950	950	950										3,000	3,000	3,000
															9,800	9,800	9,800
															1,200	1,200	1,200
			200	200	200										4,000	4,000	4,000
			120	120	120										2,000	2,000	2,000
			50	50	50										1,300	1,300	1,300
															500	500	500
			90	90	90										900	900	900
			40	40	40										400	400	400
			2,640	2,640	2,640										43,700	43,700	43,700
			693	693	693										7,150	7,150	7,150
			725	725	725										7,500	7,500	7,500
			725	725	725										7,500	7,500	7,500
			77	77	77										800	800	800
			2,220	2,220	2,220										22,950	22,950	22,950
			530	530	530										5,500	5,500	5,500
															3,000	3,000	3,000
			3,897	3,897	3,897										40,320	40,320	40,320
			2,640	2,640	2,640										43,700	43,700	43,700
			2,220	2,220	2,220										22,950	22,950	22,950
			530	530	530										5,500	5,500	5,500
															3,000	3,000	3,000
			9,287	9,287	9,287										115,470	115,470	115,470

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE I		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>BRITISH WEST INDIES</u> PUBLIC HEALTH ADMINISTRATION <u>Barbados-2, Local Health Services</u> (For text see page 12) Public Health Administrator, 4.281 Laboratory Adviser, 4.280 Public Health Nurse, 4.282 Cost of Posts <u>Allowances</u> Dependents' Staff Insurance <u>Travel and Transportation</u> Initial Recruitment and Repatriation <u>Supplies and Equipment</u> <u>Fellowships</u>		Ph Ph P3
												<u>Estimated Government Contribution</u> <u>Jamaica-5, Public Health Administration</u> <u>Fellowships</u> (For text see page 13) <u>Fellowships</u>		
												TOTAL - BRITISH WEST INDIES		
												<u>FRENCH GUIANA</u> MATERNAL AND CHILD HEALTH <u>French Guiana-1, Maternal and Child Health</u> (For text see page 13) <u>Supplies and Equipment</u>		
												TOTAL - FRENCH GUIANA		
												<u>SURINAM</u> TUBERCULOSIS <u>Surinam-3, BCG Vaccination</u> (For text see page 13) Short-term Consultants -Fees -Travel 1,460 <u>Fellowships</u>		
									1,460			TOTAL - SURINAM		
												<u>UNITED STATES</u> PUBLIC HEALTH ADMINISTRATION <u>United States-7, Public Health Administration Fellowships</u> (For text see page 13) 2,800 <u>Fellowships</u>		
									2,800			TOTAL - UNITED STATES		
* Allocated by UNICEF Executive Board														

[illegible]

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE I	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$	INTER-COUNTRY PROGRAMS	
												MALARIA AND INSECT CONTROL	
												<u>AMRO-8, Malaria and Aedes aegypti Eradication (Caribbean)</u> (For text see page 13)	
												Technical Adviser, 4.906	P4
												Sanitarian, 4.283, 4.994	P2
												Sanitarian, 4.907, 4.908, 4.909, 4.910, 4.284	P1
												Cost of Posts	
												<u>Allowances</u>	
												Dependents'	
												Staff Insurance	
												<u>Travel and Transportation</u>	
												Duty	
												Initial Recruitment and Repatriation	
												Home Leave	
												<u>Supplies and Equipment</u>	
												<u>Fellowships</u>	
												<u>Estimated Government Contribution</u>	
												VENEREAL DISEASES AND TREPONEMATOSES	
												<u>AMRO-47, Yaws Eradication and Syphilis Control (Caribbean)</u> (For text see page 13)	
												Medical Officer, 4.1083	P4
												Serologist, 4.1015	P3
												Cost of Posts	
												Short-term Consultants	
												-Fees	
												-Travel	
												<u>Allowances</u>	
												Project Service	
												Dependents'	
												Staff Insurance	
												<u>Travel and Transportation</u>	
												Duty	
												Initial Recruitment and Repatriation	
												Home Leave	
												<u>Supplies and Equipment</u>	
												<u>Fellowships</u>	
												<u>Estimated Government Contribution</u>	
												ENDENO-EPIDEMIC DISEASES	
												<u>AMRO-58, Leprosy Control (Caribbean)</u> (For text see page 14)	
									2,100			Short-term Consultants	
									1,800			-Fees	
									6,820			-Travel	
												<u>Fellowships</u>	
									10,720				

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1	3,042	7,394	7,619												
2	2	2	7,017	8,717	8,917												
5	7	7	15,530	26,867	28,267												
			25,589	42,978	44,803												
			3,967 253	4,750 428	4,750 447												
			5,904 2,270 200	9,903 1,600 1,050	7,480 200 3,420												
			7,000	7,840	7,840				1/68,000	130,000	110,000						
			5,600		6,000												
8	10	10	50,783	68,549	74,940				68,000	130,000	110,000	8	10	10	118,783	198,549	184,940
															(565,000)	(700,000)	(500,000)
1	1	1	3,650	7,412	7,637												
1	1	1	6,232	6,437	6,637												
			9,882	13,849	14,274												
			1,030 670	700 600	700 600												
			1,666 250 98	2,352 250 138	2,352 250 142												
			2,000 1,500 220	5,016 147 250	5,266 1,100												
			1,340	3,503	4,000					110,000	60,000						
2	2	2	18,656	26,805	28,684					110,000	60,000	2	2	2	18,656	136,805	88,684
															(45,000)	(200,000)	(200,000)
															10,720		

1/Of this amount \$18,000 has already been allocated by the UNICEF Executive Board.

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE I		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ENVIRONMENTAL SANITATION		PL
												AMRO-95, Environmental Sanitation (Caribbean) (For text see page 14)		
												Public Health Engineer		
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Duty Initial Recruitment and Repatriation Home Leave		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												OTHER PROJECTS		
												AMRO-22, Training Center for Public Health Nurses and Sanitary Inspectors (For text see page 14)		
												Short-term Consultants -Fees -Travel		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												FIELD OFFICE (For text see page 14)		
1	1	1	9,000	9,250	9,500							Area Supervisor, .275		
1	1	1	2,100	3,717	3,917							Administrative Assistant, .285		
1	1	1	2,270	2,402	2,492							Secretary, .276		
1	1	1	1,734	1,827	1,907							Clark Stenographer, .279		
			15,104	17,196	17,816							Cost of Posts		
												Allowances		
			833	1,000	1,000							Dependents' Repatriation Grant Pension Fund Staff Insurance		
			396	416	744							Travel and Transportation		
			2,115	2,408	2,494							Duty Initial Recruitment and Repatriation Home Leave Household Goods		
			151	172	178							Hospitality		
			3,000	3,000	3,000							Common Services		
			1,773	1,080	1,100							Space and Equipment Services Other Services Supplies and Materials Fixed Charges and Claims Acquisition of Capital Assets		
			1,500											
			100	100	100									
			50	50	50									
			1,850	1,850	1,850				106	106	106			
			400	400	400									
			115	115	115									
			300	300	2,100									
4	4	4	27,687	28,087	30,947				106	106	106			
4	4	4	27,687	39,687	43,347				10,826	106	106	TOTAL - INTER-COUNTRY PROGRAMS		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ZONE OFFICE (For text see page 12)		
1	1	1	10,900	11,200	11,300							Zone Representative, .300		D1
1	1	1	7,875	8,125	8,375	1	1	1	8,167	8,417	8,667	Veterinarian, .337		PL
1	1	1	6,512	6,737	6,962	1	1	1	8,167	8,417	8,667	Public Health Engineer, 4.303		PL
1	1	1	6,083	6,283	6,494							Medical Officer, 4.302		PL
1	1	1	2,000	2,080	2,160							Public Health Nurse, .304		P3
1	1	1	2,113	2,193	2,273							Administrative Officer, .305		P3
1	1	1	1,748	1,816	1,884							Chief Supervisor, .310		ML7
												Accountant, .330		ML7
5	5	5	7,085	7,365	7,645							Accounting Clerk, .341		ML6
1	1	1	935	979	1,023							Clerk Stenographer, .331, .332, .308, .309, .349		ML5
1	1	1	541	569	597							Chauffeur, .311		ML3
												Janitor, .340		ML1
			45,792	47,347	48,713				16,334	16,834	17,334	Cost of Posts		
			3,520	3,270	1,200				600	600	600	<u>Allowances</u>		
			1,009	1,969	1,410				200	200	200	Dependents'		
			6,413	6,629	6,821				2,288	2,358	2,428	Repatriation Grant		
			458	474	487				164	168	174	Pension Fund		
												Staff Insurance		
			5,000	5,000	5,000				4,500	4,500	4,500	<u>Travel and Transportation</u>		
			2,015	7,816	2,015				1,370			Duty		
									1,178	1,977	1,318	Initial Recruitment and Repatriation		
									1,200			Home Leave		
			200	200	200							Household Goods		
												<u>Hospitality</u>		
			2,970	2,970	2,970							<u>Common Services</u>		
			5,200	5,200	5,200				320	320	320	Space and Equipment Services		
			1,200	1,200	1,200							Other Services		
			170	170	170							Supplies and Materials		
			500	2,000	500							Fixed Charges and Claims		
												Acquisition of Capital Assets		
14	14	14	74,447	81,245	75,886	2	2	2	28,154	26,957	26,874	TOTAL		
												<u>CUBA</u>		
												MALARIA AND INSECT CONTROL		
												<u>Cuba-1, Aedes aegypti Eradication</u> (For text see page 15)		
1	1	1	7,544	7,771	8,031							Insect Control Adviser, .336		PL
1	1	1	4,967	5,167	5,367							Sanitarian, .344		P2
			12,511	12,938	13,398							Cost of Posts		
												<u>Allowances</u>		
			4,800	4,800	4,800							Project Service		
			1,200	1,200	1,200							Dependents'		
				800	240							Repatriation Grant		
			695	723	751							Pension Fund		
			125	130	134							Staff Insurance		
												<u>Travel and Transportation</u>		
			3,200	2,000	2,000							Duty		
			2,500	2,580	2,500							Home Leave		
			5,340	10,000	10,000							<u>Supplies and Equipment</u>		
2	2	2	30,371	35,171	35,023							<u>Estimated Government Contribution</u>		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Cuba-5, Malaria Eradication (For text see page 15)		Pl4
												Medical Officer		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation Home Leave		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		Pl4 Pl4 P3
												PUBLIC HEALTH ADMINISTRATION		
												Cuba-3, Public Health Services (For text see page 15)		
												Medical Officer Sanitary Engineer Public Health Nurse		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Estimated Government Contribution</u>		P3 P2
												NURSING		
												Cuba-4, Nursing Education (For text see page 15)		
												Nursing Educator Public Health Nurse		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
2	2	2	30,371	35,171	35,023							TOTAL - CUBA		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
	1	1		5,472	7,469												
				188 55	250 75												
				900	750												
				800	800												
	1	1		7,415	9,344								1	1		7,415	9,344
																(175,000)	(175,000)
	1	1		3,648	7,412												
	1	1		3,648	7,412												
	1	1		3,000	6,100												
				10,296	20,924												
				475 103	750 209												
				2,700	2,250												
										40,000							
	3	3		13,574	24,133					40,000			3	3		53,574	24,133
																(50,000)	(50,000)
	1	1		4,500	6,150												
	1	1		3,600	4,950												
				8,100	11,100												
				208 81	300 111												
				1,700	1,500												
				1,000	5,000												
				4,800	6,500												
	2	2		15,889	24,511								2	2		15,889	24,511
																(30,000)	(30,000)
	6	6		36,878	57,988					40,000		2	8	8	30,371	112,049	93,011

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES				
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957		
			\$	\$	\$				\$	\$	\$	<u>DOMINICAN REPUBLIC</u>	
												MALARIA AND INSECT CONTROL	
												<u>Dominican Republic-2, Malaria and</u> <u>Aedes aegypti Eradication (For text</u> <u>see page 15)</u>	Pl P2
												Malariaologist, 4.316 Sanitarian, 4.317	
												Cost of Posts	
												<u>Allowances</u>	
												Dependents' Staff Insurance	
												<u>Travel and Transportation</u>	
												Duty Initial Recruitment and Repatriation Home Leave	
												<u>Supplies and Equipment</u>	
												<u>Estimated Government Contribution</u>	
												VENEREAL DISEASES AND TREPONEMATOSES	
												<u>Dominican Republic-52, Venereal</u> <u>Disease Control</u> (For text see page 15)	Pl
												Medical Officer, .320	
												<u>Allowances</u>	
												Project Service Dependents' Repatriation Grant Pension Fund Staff Insurance	
												<u>Travel and Transportation</u>	
												Duty Home Leave	
1	1	1	8,209	8,458	8,709								
			1,728	1,728	1,728								
			600	400	400								
			380	376	392								
			1,150	1,185	1,220								
			82	85	87								
			725	740	740								
				550									
1	1	1	12,874	13,522	13,276								
												<u>Estimated Government Contribution</u>	
												PUBLIC HEALTH ADMINISTRATION	
												<u>Dominican Republic-4, Reorganization</u> <u>of Local Health Services</u> (For text see page 16)	Pl Pl P3
												Medical Officer, .342 Public Health Engineer, .353 Nurse, .343	
												Cost of Posts	
												<u>Allowances</u>	
												Project Service Dependents Staff Insurance	
												<u>Travel and Transportation</u>	
												Duty Initial Recruitment and Repatriation Home Leave	
1	1	1	7,488	7,713	7,959								
1	1	1	6,267	7,488	7,713								
1	1	1	5,034	6,167	6,367								
			18,789	21,368	22,039								
			4,666	5,184	5,184								
			2,399	2,800	2,800								
			189	214	221								
			2,160	1,160	1,160								
			5,020	1,077	6,544								

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Dominican Republic-4, (continued)		
			12,000									<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
3	3	3	45,223	31,803	37,948									
												<u>Estimated Government Contribution</u>		
												<u>Dominican Republic-7, Public Health Administration Fellowships</u> (For text see page 16)		
												<u>Fellowships</u>		
4	4	4	58,097	45,325	51,224							TOTAL - DOMINICAN REPUBLIC		
												<u>HAITI</u>		
												MALARIA AND INSECT CONTROL		
												<u>Haiti-4, Malaria and Aedes aegypti Eradication</u> (For text see page 16)		
												Insect Control Adviser, 4.324 Sanitarian, 4.325 Sanitarian, 4.357, 4.358		P4 P2 P1
												Cost of Posts		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												VENEREAL DISEASES AND TREPONEMATOSES		
												<u>Haiti-1, Yaws Eradication and Syphilis Control</u> (For text see page 16)		
1	1	1	8,167	8,417	8,667	1	1	1	6,635 6,034	7,356 6,234	7,581	Medical Officer, 4.323, .335 Medical Officer, 4.352		P4 P3
			8,167	8,417	8,667				12,669	13,590	7,581	Cost of Posts		
			700 600									Short-term Consultants -Fees -Travel		
			5,184 1,900 81 380 1,144	1,728 1,300 84 376 1,179	1,728 1,250 86 392 1,214				1,324 126	3,456 1,050 135	1,728 250 76	<u>Allowances</u> Project Service Dependents' Staff Insurance Repatriation Grant Pension Fund		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									50,000		35,000						
									50,000		35,000	3	3	3	95,223	31,803	72,948
															(120,000)	(300,000)	(300,000)
			23,800		8,000										23,800		8,000
2	2	2	40,713	16,945	25,337				50,000	50,000	35,000	6	6	6	148,810	112,270	111,561
1	1	1	7,357	7,582	7,807												
1	1	1	5,000	5,200	5,400												
2	2	2	2,700	7,350	7,750												
			15,057	20,132	20,957												
			1,000	1,000	1,000												
			151	202	208												
			1,110	800	800												
			1,600	500	2,025												
				1,500					2/169,000		50,000						
				3,000													
4	4	4	19,443	27,134	24,990				169,000		50,000	4	4	4	188,443	27,134	74,990
															(190,000)	(190,000)	(190,000)

2/ \$159,000 already allocated by the UNICEF Executive Board.

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>Haiti-1, (continued)</u>		P1 P1 P3 P2
												<u>Travel and Transportation</u>		
			2,880	720	720				1,936	2,160	1,440	Duty		
			875						770	480		Initial Recruitment and Repatriation		
										250	750	Home Leave		
										1,000		<u>Supplies and Equipment</u>		
1	1	1	21,911	13,804	14,057	2	2	1	16,825	22,121	11,825			
												<u>Estimated Government Contribution</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Haiti-2, Local Health Services</u>		
												(For text see page 17)		
												Medical Officer		
												Sanitary Engineer		
												Public Health Nurse		
												Sanitarian		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
1	1		4,136	6,067								<u>Haiti-9, Public Health Laboratory</u>		P3
												(For text see page 17)		
												Public Health Laboratory Adviser, 339		
												<u>Allowances</u>		
												Project Service		
			1,152	1,728								Dependents'		
			442	600								Staff Insurance		
			41	61								<u>Travel and Transportation</u>		
												Duty		
			400	600								Initial Recruitment and Repatriation		
			1,456									<u>Supplies and Equipment</u>		
			5,000									<u>Fellowships</u>		
			2,100									<u>Estimated Government Contribution</u>		
1	1		14,727	9,056										
												<u>Estimated Government Contribution</u>		P2
												NURSING		
												<u>Haiti-10, Training of Midwives</u>		
												(For text see page 17)		
						1	1		2,800	2,000		Nurse, 4,359		
												<u>Allowances</u>		
												Project Service		
									1,008	720		Staff Insurance		
									28	20				

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE II		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>Haiti-10, (continued)</u>		
									916	550		<u>Travel and Transportation</u>		
									2,500			Initial Recruitment and Repatriation		
												<u>Fellowships</u>		
						1	1		7,252	3,290				
												<u>Estimated Government Contribution</u>		
2	2	1	36,638	22,860	14,057	3	3	1	24,077	25,411	11,825	TOTAL - HAITI		
												<u>MEXICO</u>		
												MALARIA AND INSECT CONTROL		
												<u>Mexico-53, Malaria and Aedes aegypti</u>		
												<u>Eradication</u>		
												(For text see page 17)		
												Insect Control Adviser, 4.314, 4.338		P4
												Malariaologist, 4.361		P4
												Malaria Eradication Adviser, 4.360		P4
												Sanitarian, 4.347		P2
												Sanitarian, 4.348		P1
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												VENEREAL DISEASES AND TREPONEMATOSES		
												<u>Mexico-13, Venereal Disease Training</u>		
												<u>Course</u>		
												(For text see page 17)		
			300	300	300							<u>Supplies and Materials</u>		
												<u>Estimated Government Contribution</u>		
												ENDEMO-EPIDEMIC DISEASES		
												<u>Mexico-20, Virus Center</u>		
												(For text see page 18)		
									3,000	3,000		<u>Supplies and Equipment</u>		
										1,000	1,000	<u>Fellowships</u>		
									3,000	4,000	1,000			
												<u>Estimated Government Contribution</u>		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	ZONE II		
			\$	\$	\$				\$	\$	\$	PUBLIC HEALTH ADMINISTRATION		P4 P4 P3 P2
						1	1	1	2,433	7,375	7,600	<u>Mexico-22, Integrated Health Services</u> (For text see page 18)		
						1	1	1	3,000	7,300	7,525	Public Health Administrator, 4.354		
							1	1		6,100	6,300	Sanitary Engineer		
							1	1		4,800	5,000	Public Health Nurse, 4.356		
												Sanitarian		
									5,433	25,575	26,425	Cost of Posts		
									960	4,608	4,608	<u>Allowances</u>		
									208	800	800	Project Service		
									54	255	264	Dependents' Staff Insurance		
									3,000	2,750	3,000	<u>Travel and Transportation</u>		
										500		Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
									4,000		8,000	<u>Fellowships</u>		
						2	4	4	13,655	34,488	43,097	<u>Estimated Government Contribution</u>		
												NURSING		
												<u>Mexico-11, Course for Nursing Instructors</u> (For text see page 18)		
			1,600	4,900								Short-term Consultants		
			960	4,200								-Fees		
												-Travel		
			16									<u>Allowances</u>		
			9,000									Staff Insurance		
			108									<u>Fellowships</u>		
			11,684	9,100								<u>Reimbursement of Income Tax</u>		
												<u>Estimated Government Contribution</u>		
												<u>Mexico-12, National University - School of Nursing</u> (For text see page 18)		
1	1	1	5,700	6,150	6,350							Nurse Educator, .346		
1	1	1	4,884	5,084	5,284							Nurse Educator, .345		
2	2	1	9,651	10,051	5,234							Nurse, .351, .350		
			20,235	21,285	16,868							Cost of Posts		
			4,640	4,640	3,480							<u>Allowances</u>		
			202	213	169							Project Service		
												Staff Insurance		
				190								<u>Travel and Transportation</u>		
				2,165								Initial Recruitment and Repatriation Home Leave		
			3,000	1,000								<u>Supplies and Equipment</u>		
			12,000	4,000	8,000							<u>Fellowships</u>		
4	4	3	40,077	33,493	28,517							<u>Estimated Government Contribution</u>		
4	4	3	52,061	42,893	28,817	2	4	4	16,655	38,488	44,097	TOTAL - MEXICO		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
										125,000							
										125,000		2	4	4	13,655	159,488	43,097
															(100,000)	(100,000)	(100,000)
															11,684	9,100	
															(10,000)	(10,000)	
												4	4	3	40,077	33,493	28,517
															(37,000)	(37,000)	(37,000)
6	6	6	58,577	51,770	52,423				2,600,000	2,125,000	2,000,000	12	14	13	2,727,293	2,258,151	2,125,337

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
												ZONE III		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	ZONE OFFICE (For text see page 12)		
1	1	1	\$	\$	\$				\$	\$	\$	Zone Representative, .400 Medical Officer, .401 Sanitary Engineer, .402 Public Health Nurse, .405 Administrative Officer, .407 Administrative Assistant, .408 Accountant, .409 Records and Communications Clerk, .410 Secretary, .411 Senior Clerk, .414 Accounting Clerk, .439 Clerk Stenographer, .412, .413, .415, .414 Junior Clerk, .416 Janitor-Messenger, .417 Cost of Posts <u>Allowances</u> Dependents' Pension Fund Repatriation Grant Staff Insurance <u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave Household Goods <u>Hospitality</u> <u>Common Services</u> Space and Equipment Services Other Services Supplies and Materials Fixed Charges and Claims Acquisition of Capital Assets		
1	1	1	10,900	11,200	11,300	1	1	1	7,656	7,896	8,146			
			7,300	7,525	7,750									
1	1	1	6,569	6,794	7,019									
1	1	1	6,475	6,700	6,925									
1	1	1	3,180	3,300	3,420									
1	1	1	3,180	3,300	3,420									
1	1	1	2,760	2,880	3,000									
1	1	1	2,760	2,880	3,000									
1	1	1	2,100	2,200	2,300									
1	1	1	2,100	2,200	2,300									
4	4	4	7,800	8,200	8,600									
1	1	1	1,380	1,470	1,560									
1	1	1	960	1,020	1,080									
			57,464	59,669	61,674				7,656	7,896	8,146			
			1,400	1,400	1,400				442	500	500			
			927	916	2,234				100	100	100			
			8,049	8,349	8,629				1,072	1,105	1,140			
			575	597	617				76	79	81			
			3,000	3,000	3,000				2,500	2,500	2,500			
			2,438											
			600	2,050	1,700				1,200		1,200			
			1,500											
			200	200	200									
			3,172	3,172	3,172									
			5,150	5,150	5,150				320	320	320			
			1,000	1,000	1,000									
			390	390	390									
			2,000	500	500									
16	16	16	87,865	86,393	89,666	1	1	1	13,366	12,500	13,987	TOTAL		
												ASSISTANCE TO INCAP (For text see page 22) Medical Director, .946 Assistant Director, .438 Editorial Assistant, .997 Cost of Posts <u>Allowances</u> Dependents' Pension Fund Repatriation Grant Staff Insurance <u>Travel and Transportation</u> Duty Home Leave		
1	1	1	9,950	10,250	10,550									
1	1	1	7,525	7,750	8,000									
1	1	1	2,880	3,000	3,120									
			20,355	21,000	21,670									
			1,400	1,400	1,400									
			2,851	2,940	3,034									
			448	472	496									
			204	210	217									
			2,500	2,500	2,500									
			1,330		1,700									
3	3	3	29,088	28,522	31,017							TOTAL		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	10,900	11,200	11,300
												1	1	1	7,300	7,525	7,750
												1	1	1	7,656	7,896	8,116
												1	1	1	6,569	6,794	7,019
												1	1	1	6,475	6,700	6,925
												1	1	1	3,180	3,300	3,420
												1	1	1	3,180	3,300	3,420
												1	1	1	2,760	2,880	3,000
												1	1	1	2,760	2,880	3,000
												1	1	1	2,100	2,200	2,300
												1	1	1	2,100	2,200	2,300
												4	4	4	7,800	8,200	8,600
												1	1	1	1,380	1,470	1,560
												1	1	1	960	1,020	1,080
															65,120	67,565	69,820
															1,842	1,900	1,900
															1,027	1,016	2,334
															9,121	9,454	9,769
															651	676	698
															5,500	5,500	5,500
															2,438		
															1,800	2,050	2,900
															1,500		
															200	200	200
			130	130	130										3,172	3,172	3,172
															5,600	5,600	5,600
															1,000	1,000	1,000
															390	390	390
															2,000	500	500
			130	130	130							17	17	17	101,361	99,023	103,783
												1	1	1	9,950	10,250	10,550
												1	1	1	7,525	7,750	8,000
												1	1	1	2,880	3,000	3,120
															20,355	21,000	21,670
															1,400	1,400	1,400
															2,851	2,940	3,034
															448	472	496
															204	210	217
															2,500	2,500	2,500
															1,330		1,700
												3	3	3	29,088	28,522	31,017

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>BRITISH HONDURAS</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>British Honduras-3, Public Health Administration Fellowships</u> (For text see page 19)		
												<u>Fellowships</u>		
												TOTAL - BRITISH HONDURAS		
												<u>COSTA RICA</u>		
												ENDEMO-EPIDEMIC DISEASES		
												<u>Costa Rica-11, Poliomyelitis Rehabilitation</u> (For text see page 19)		
			2,700									Short-term Consultants		
			1,525									-Fees		
												-Travel		
												<u>Allowances</u>		
			27									Staff Insurance		
			4,252											
												NURSING		
												<u>Costa Rica-3, Nursing Education</u> (For text see page 19)		
												Nurse Educator, 4.420		P3
												Nurse Educator, 4.421, 4.423, 4.424, 4.444		P2
												Cost of Posts		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Allowances</u>		
												Dependents'		
												Project Service		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												MATERNAL AND CHILD HEALTH		
												<u>Costa Rica-7, Maternal and Child Health and School Health Services</u> (For text see page 19)		
												<u>Supplies and Equipment</u>		
			4,252									TOTAL - COSTA RICA		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
												ZONE III		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	EL SALVADOR		P4 P4 P3 P2
			\$	\$	\$				\$	\$	\$	PUBLIC HEALTH ADMINISTRATION		
												<u>El Salvador-5, Health Demonstration Area (For text see page 19)</u>		
												Medical Officer, 4.425		
												Sanitary Engineer, 4.426		
												Public Health Nurse, 4.428		
												Public Health Nurse, 4.427		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												MATERNAL AND CHILD HEALTH		
												<u>El Salvador-7, School Health Services (For text see page 19)</u>		
												<u>Supplies and Equipment</u>		
												TOTAL - EL SALVADOR		
												<u>GUATEMALA</u>		
												TUBERCULOSIS		
												<u>Guatemala-11, BCG Vaccination (For text see page 20)</u>		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Supplies and Equipment</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Guatemala-7, Public Health Administration Fellowships 20)</u> (For text see page		
												<u>Fellowships</u>		
												<u>Guatemala-8, Rural Public Health Services (For text see page 20)</u>		
						1	1	1	7,200	7,200	7,200	Medical Officer, 4.442		
						1	1	1	6,854	7,507	7,732	Sanitary Engineer, 4.447		
						1	1	1	5,517	6,184	6,384	Public Health Nurse, 4.443		
						1	1	1	2,400	4,900	5,100	Public Health Nurse		
									21,971	25,791	26,416	Cost of Posts		
												<u>Allowances</u>		
									7,479	8,756	8,756	Project Service		
									1,112	1,450	1,650	Dependents'		
									219	257	261	Staff Insurance		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE III			GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES						
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957				
			\$	\$	\$				\$	\$	\$	Guatemala-8, (continued)			
									827	879	870	<u>Travel and Transportation</u>			
									3,558	600	1,930	Duty			
											2,950	Initial Recruitment and Repatriation			
									6,000	2,000	4,855	Home Leave			
											8,000	<u>Supplies and Equipment</u>			
												<u>Fellowships</u>			
						4	4	4	41,166	39,733	55,688	<u>Estimated Government Contribution</u>			
												NURSING			
												<u>Guatemala-6, Training of Auxiliary Nurses</u> (For text see page 20)			
						1	1	1	2,500	6,083	6,283	Nurse Educator, 4.453			
												<u>Allowances</u>			
									105	250	250	Dependents'			
									660	1,584	1,584	Project Service			
									25	60	62	Staff Insurance			
												<u>Travel and Transportation</u>			
									275	275	275	Duty			
									1,500			Initial Recruitment and Repatriation			
										250	750	Home Leave			
									4,000	4,000	1,200	<u>Supplies and Equipment</u>			
									4,000	4,000	8,000	<u>Fellowships</u>			
						1	1	1	13,065	16,502	18,404	<u>Estimated Government Contribution</u>			
												TOTAL - GUATEMALA			
						5	5	5	54,231	56,235	74,092				
												<u>HONDURAS</u>			
												TUBERCULOSIS			
												<u>Honduras-5, BCG Vaccination</u> (For text see page 20)			
												Short-term Consultants			
												-Fees			
												-Travel			
												<u>Supplies and Equipment</u>			
												PUBLIC HEALTH ADMINISTRATION			
												<u>Honduras-4, Rural Public Health Services</u> (For text see page 20)			
												Medical Officer, 4.450			
												Sanitary Engineer, 4.451			
												Public Health Nurse, 4.452			
												Nurse			
												Cost of Posts			
												<u>Allowances</u>			
												Dependents'			
												Staff Insurance			
												<u>Travel and Transportation</u>			
												Initial Recruitment and Repatriation			
												Home Leave			

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									*26,000	55,000	50,000						
									26,000	55,000	50,000	4	4	4	67,166	94,733	105,688
															(300,000)	(500,000)	(500,000)
												1	1	1	13,065	16,502	18,404
															(25,000)	(50,000)	(50,000)
			20,800		8,000				64,900	55,000	50,000	5	5	5	139,931	111,235	132,092
									2,100								
									1,800								
									25,000								
									28,900						28,900		
1	1	1	3,042	7,394	7,619												
1	1	1	3,042	7,394	7,619												
1	1	1	2,500	6,083	6,283												
		1			4,800												
			8,584	20,871	26,321												
			375	750	800												
			85	208	262												
			2,700		800												
				750	2,250												

*Allocated by UNICEF Executive Board

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	ZONE III		
			\$	\$	\$				\$	\$	\$	(Honduras-4, continued)		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												TOTAL - HONDURAS		
												<u>NICARAGUA</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Nicaragua-3, Rural Public Health Services</u>		
												(For text see page 21)		
												Medical Officer, 4.445		P4
												Sanitary Engineer, 4.441		P4
												Public Health Nurse, 4.446		P3
												Nurse		P2
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												NURSING		
												<u>Nicaragua-5, Nursing Education</u>		
												(For text see page 21)		
						1	1	1	5,000	6,167	6,367	Nurse Educator, 4.448		P3
						1	2	2	3,467	9,750	10,150	Nurse Educator, 4.449		P2
									8,467	15,917	16,517	Cost of Posts		
												<u>Allowances</u>		
									2,468	4,908	4,908	Project Service		
									83	150	150	Dependents'		
									84	158	164	Staff Insurance		
												<u>Travel and Transportation</u>		
									2,078	1,250	2,180	Initial Recruitment and Repatriation		
											1,700	Home Leave		
									5,000	2,000	5,000	<u>Supplies and Equipment</u>		
									8,000	8,000	8,000	<u>Fellowships</u>		
						2	3	3	26,180	32,383	38,619	<u>Estimated Government Contribution</u>		
						2	3	3	26,180	32,383	38,619	TOTAL - NICARAGUA		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>PANAMA</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Panama-1, Rural Public Health Services</u> (For text see page 21)		
												Medical Officer, 4.432		Ph
												Public Health Engineer, 4.433		Ph
												Laboratory Expert, 4.434		Ph
												Public Health Nurse, 4.435		P3
												Public Health Nurse, 4.440		P2
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Project Service		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												TOTAL - PANAMA		
												<u>INTER-COUNTRY PROGRAMS</u>		
												MALARIA AND INSECT CONTROL		
												<u>AMRO-7, Malaria and Aedes aegypti</u> <u>Eradication (Central America and</u> <u>Panama) (For text see page 21)</u>		
												Insect Control Adviser, 4.900, 4.902		Ph
												Sanitarian, 4.903		P2
												Sanitarian, 4.904, 4.995		P1
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1	8,042	8,292	8,542												
1	1	1	7,750	8,000	8,250												
1			5,167														
1	1	1	8,088	6,813	7,038												
1	1	1	4,850	5,050	5,250												
			33,897	28,155	29,080												
			2,334	2,400	2,400												
			8,730														
			200	200	200												
			2,018	2,114	2,181												
			337	281	289												
			600														
			1,200														
			1,400	3,100	1,400												
			13,000	4,000	4,000					20,000							
			10,000	10,000	10,000												
5	4	4	73,746	50,250	49,550					20,000		5	4	4	73,746	70,250	49,550
															(1,500,000)	(1,500,000)	(1,500,000)
5	4	4	73,746	50,250	49,550					20,000		5	4	4	73,746	70,250	49,550
2	2	2	12,031	15,535	16,010												
1	1	1	5,250	5,450	5,650												
2	2	2	3,600	7,400	7,800												
			20,881	28,385	29,460												
			2,156	2,700	2,700												
			207	283	294												
			3,000	3,000	3,000												
			3,090	6,750	4,300												
			5,920	6,000	6,000				120,000	360,000	360,000						
				4,000	12,000												
5	5	5	35,254	51,118	57,754				120,000	360,000	360,000	5	5	5	155,254	411,118	417,754
															(360,000)	(360,000)	(360,000)

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									(1) 18,000	(1) 18,000	(1) 18,000						
									18,000	18,000	18,000	3	3	3	56,117	56,234	57,941
												2	1	1	22,817	12,314	11,616

(1) Gorgas Memorial Laboratory

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS	
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	ZONE III	
			\$	\$	\$				\$	\$	\$	<u>INCAP Operations - Financed by Member Countries</u> Personal Services and Allowances Travel and Transportation Space and Equipment Other Services Supplies and Materials Fixed Charges and Claims Grants and Contracted Technical Services Fund for Scientific Publications <u>INCAP Projects - Financed from Contributions and Grants</u> Books, Supplies and Equipment for INCAP Laboratory Equipment for INCAP Nutritional Diseases Investigations Study of Indigenous Plants Study of Varieties of Corn Protein Nutrition Study	
			13,800	13,800	13,800							TOTAL - ASSISTANCE TO INCAP	
3	3	3	51,917	52,034	53,741	2	1	1	22,817	12,314	11,616	TOTAL - INTER-COUNTRY PROGRAMS	
PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III	GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS	
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	ZONE IV	
1	1	1	\$	\$	\$				\$	\$	\$	<u>ZONE OFFICE</u> (For text see page 12) Zone Representative, .600 Medical Officer, .601 Public Health Engineer, .602 Public Health Veterinarian, 4.605 Public Health Nurse, .606 Administrative Officer, .608 Accountant, .609 Accounting Clerk, .654 Office Services Clerk, .614 Secretary, .613 Clerk Stenographer, .610, .611, .612, .615, .616 Chauffeur, .617 Messenger, .619	D1 P4 P4 P4 P3 P3 LL6 LL5 LL4 LL4
1	1	1	10,900	11,200	11,300	1	1	1	7,300	7,525	7,750	Cost of Posts	LL4
1	1	1	7,619	7,854	8,104							<u>Allowances</u> Dependents'	LL1
1	1	1	7,300	7,525	7,750							Repatriation Grant Pension Fund Staff Insurance	LL1
1	1	1	6,494	6,719	6,944							<u>Travel and Transportation</u> Duty	LL4
1	1	1	6,283	6,494	6,719							Initial Recruitment and Repatriation Home Leave Household Goods	LL4
1	1	1	2,482	2,940	3,065							<u>Hospitality</u>	LL4
1	1	1	1,800	1,950	2,050							<u>Common Services</u>	LL4
1	1	1	1,446	1,594	1,669							Space and Equipment Services Other Services Supplies and Materials Fixed Charges and Claims Acquisition of Capital Assets	LL4
1	1	1	1,775	1,931	2,006								
5	5	5	7,939	8,628	8,970								
1	1	1	724	750	750								
1	1	1	457	529	579								
			55,219	58,114	59,906				7,300	7,525	7,750		
			2,400	2,600	2,600				400	400	400		
			1,976	1,088	1,265				100	100	100		
			7,729	8,136	8,388				1,022	1,054	1,085		
			552	581	599				73	75	78		
			7,500	7,500	7,500				2,500	2,500	2,500		
			2,250						1,250				
			1,081	2,085	2,478				450				
			1,880										
			200	200	200								
			3,590	3,590	3,590								
			4,800	4,800	4,800				320	320	320		
			1,370	1,370	1,370								
			170	170	170								
			1,500	500	500								
16	16	16	92,217	90,734	93,366	1	1	1	13,415	11,974	13,333	TOTAL	

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
						21	21	21	53,371	60,339	62,982						
									2,700	2,700	2,700						
									3,250	3,316	2,435						
									7,516	3,716	2,835						
									3,623	3,616	2,735						
									740	600	600						
									600	713	713						
									3,200								
						21	21	21	75,000	75,000	75,000						
									537								
									2,758								
									19,671	8,500							
									4,701								
									10,000								
									9,000								
									<u>1/</u> 46,667	8,500							
						21	21	21	121,667	83,500	75,000	21	21	21	135,467	97,300	88,800
5	5	5	35,254	51,118	57,754	21	21	21	259,667	461,500	453,000	31	30	30	369,655	576,966	576,111

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
												1	1	1	10,900	11,200	11,300
												1	1	1	7,619	7,854	8,104
												1	1	1	7,300	7,525	7,750
												1	1	1	7,300	7,525	7,750
												1	1	1	6,494	6,719	6,944
												1	1	1	6,283	6,494	6,719
												1	1	1	2,482	2,940	3,065
												1	1	1	1,800	1,950	2,050
												1	1	1	1,446	1,594	1,669
												1	1	1	1,775	1,931	2,006
												5	5	5	7,939	8,628	8,970
												1	1	1	724	750	750
												1	1	1	457	529	579
															62,519	65,639	67,656
															2,800	3,000	3,000
															2,076	1,188	1,365
															8,751	9,190	9,473
															625	656	677
															10,000	10,000	10,000
															3,500		
															1,081	2,085	3,578
															2,330		
															200	200	200
															3,590	3,590	3,590
															5,250	5,250	5,250
															1,370	1,370	1,370
															170	170	170
															1,500	500	500
			130	130	130												
			130	130	130							17	17	17	105,762	102,838	106,829

1/ Represents funds carried over from 1954 as well as funds received in 1955.

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE	
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES						
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957				
			\$	\$	\$				\$	\$	\$	<u>BOLIVIA</u>			
1			7,431									MALARIA AND INSECT CONTROL		Ph	
												<u>Bolivia-4, Malaria Eradication</u> (For text see page 23)			
												Malariologist, .655			
			800 368 74									<u>Allowances</u> Dependents' Project Service Staff Insurance			
			700 1,400									<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave			
												<u>Supplies and Equipment</u>			
1			10,773												
												<u>Estimated Government Contribution</u>			
												PUBLIC HEALTH ADMINISTRATION			
												<u>Bolivia-10, Public Health Services</u> (For text see page 23)			
1	1	1	4,869	7,450	7,675							Medical Officer, .661		Ph Ph P3	
1	1	1	4,869	7,450	7,675							Sanitary Engineer, .662			
1	1	1	2,500	6,083	6,283							Public Health Nurse, .663			
			12,238	20,983	21,633							Cost of Posts			
												<u>Allowances</u> Project Service Dependents' Staff Insurance			
			987 1,332 123	1,692 2,000 211	1,692 2,000 217							<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave			
			890 5,771	1,539	1,539 5,350							<u>Supplies and Equipment</u>			
					8,000							<u>Fellowships</u>			
3	3	3	21,341	26,425	40,431										
												<u>Estimated Government Contribution</u>			
												NURSING			
												<u>Bolivia-5, Nursing Education</u> (For text see page 23)			
						1	1	1	6,267	6,475	6,700	Nurse Educator, 4.651		P3 P2 Ung	
						1	1	1	4,883	5,083	5,283	Nurse Educator, 4.656			
						1	1	1	4,200	4,800	4,800	Nurse Educator, 4.665			
									15,350	16,358	16,783	Cost of Posts			
												<u>Allowances</u> Project Service Staff Insurance			
									3,938 153	4,728 162	4,728 167	<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave			
									120 850 1,000	500	850 1,000				

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$ 2,000	\$	\$	Bolivia-5, (continued)		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
						3	3	3	23,411	21,748	23,528			
												<u>Estimated Government Contribution</u>		
												ENVIRONMENTAL SANITATION		
												Bolivia-6, Study of Water Supply (La Paz) (For text see page 23)		
									2,000			<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
4	3	3	32,114	26,425	40,431	3	3	3	25,411	21,748	23,528	TOTAL - BOLIVIA		
												COLOMBIA		Pl Pl Pl P2
												MALARIA AND INSECT CONTROL		
												Colombia-5, Malaria and Aedes aegypti Eradication (For text see page 23)		
												Technical Adviser, 4.622 Malaria Eradication Adviser, 4.674 Malariologist, 4.675 Sanitarian, 4.624		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents' Repatriation Grant Pension Fund Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		Pl
												TUBERCULOSIS		
												Colombia-15, Tuberculosis Control (BCG) (For text see page 24)		
												Medical Officer, 4.659		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												<u>Estimated Government Contribution</u>		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			3,680	3,000	6,000												
			3,680	3,000	6,000							3	3	3	27,091	24,748	29,528
															(184,211)	(184,211)	(184,211)
				5,000											2,000	5,000	
															(12,000)	(12,000)	(12,000)
	1	1	3,680	17,012	15,089					60,000	147,600	7	7	7	61,205	125,185	226,648
1	1	1	8,167	8,417	8,667												
1	1	1	2,433	7,375	7,600												
1	1	1	2,130	7,375	7,600												
1	1	1	5,350	5,550	5,750												
			18,080	28,717	29,617												
			1,365	1,300	1,300												
			200	200	200												
			2,228	1,178	1,213												
			180	286	296												
			774	774	984												
			1,800														
			1,220	1,260	2,720												
			4,800								1,200,000						
4	4	4	30,647	33,715	36,330						1,200,000	4	4	4	30,647	33,715	1,236,330
															(419,376)	(1,400,000)	(2,100,000)
						1	1		7,450	2,508							
									2,000	603							
									75	25							
										2,300							
						1	1		*9,525	5,436		1	1		9,525	5,436	
															(500,000)	(200,000)	

*Allocated by UNICEF Executive Board

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ENDEMO-EPIDEMIC DISEASES		
												Colombia-52, Yellow Fever, Carlos Finlay Institute (For text see page 24)		
			31,648	31,648	31,648							Cooperative Agreement		
												Estimated Government Contribution		
												PUBLIC HEALTH ADMINISTRATION		
												Colombia-4, Rural Public Health Services (For text see page 24)		
												Medical Officer, 4.666 Public Health Engineer, 4.667 Public Health Nurse, 4.668, 4.621 Nurse Educator		Pl Pl P3 P2
												Cost of Posts		
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Duty Initial Recruitment and Repatriation Home Leave		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
			31,648	31,648	31,648							TOTAL - COLOMBIA		
												ECUADOR		
												TUBERCULOSIS		
												Ecuador-5, Tuberculosis Teaching Center (For text see page 25)		
									2,100 1,800			Short-term Consultants -Fees -Travel		
												Allowances		
									21			Staff Insurance		
									2,500	2,500	2,500	Fellowships		
									6,421	2,500	2,500	Estimated Government Contribution		
												ENDEMO-EPIDEMIC DISEASES		
												Ecuador-11, National Institute of Health (For text see page 25)		
												Specialist in Viruses, 4.645 Chemist, 4.646		Pl Pl
												Cost of Posts		
												Short-term Consultants -Fees -Travel		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Ecuador-11, (continued)		
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Duty Initial Recruitment and Repatriation		
												Fellowships		
												Estimated Government Contribution		
												PUBLIC HEALTH ADMINISTRATION		
												Ecuador-4, Rural Public Health Services (For text see page 25)		
1			7,544				1	1		7,300	7,525	Medical Officer, .652		Ph
1			5,200				1	1		6,000	6,200	Specialist in Administrative Sanitation		Ph
												Public Health Nurse		P3
												Public Health Nurse, .664		P2
			12,744							13,300	13,725	Cost of Posts		
												Allowances		
												Project Service		
												Dependents' Staff Insurance		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												Travel and Transportation		
												Duty Initial Recruitment and Repatriation		
												Home Leave		
												Supplies and Equipment		
												Fellowships		
												Estimated Government Contribution		
												NURSING		
												Ecuador-16, Nursing Education (For text see page 25)		
							1	1		6,000	6,200	Nurse Educator		P3
												Nurse Educator		P2
												Cost of Posts		
												Allowances		
												Project Service		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Duty Initial Recruitment and Repatriation		
												Home Leave		
												Fellowships		
												Estimated Government Contribution		
							1	2		14,301	21,592			
												Estimated Government Contribution		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	NUTRITION		P4
												Ecuador-53, National Institute of Nutrition (For text see page 26)		
												Medical Nutritionist		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		P4
												Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
2			28,132				3	4	6,421	47,288	53,508	TOTAL - ECUADOR		
												<u>PERU</u>		P4
												PUBLIC HEALTH ADMINISTRATION		
												Peru-13, Public Health Demonstration and Training Center (Callao) (For text see page 26)		
												Medical Officer, 4.637		
												<u>Allowances</u>		
												Dependents' Staff Insurance		P4 P4 P3 P3
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												Peru-22, Public Health Services (For text see page 26)		P4 P4 P3 P3
												Medical Officer Sanitary Engineer Public Health Nurse Statistician		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		P4 P4 P3 P3
												Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
1	1	1	1,825	7,356	7,581												
			63 18	250 73	250 75												
			900	250	750												
			500														
			11,000		8,000												
1	1	1	14,306	7,929	16,656							1	1	1	14,306	7,929	16,656
															(40,000)	(40,000)	(40,000)
3	2	1	34,439	12,927	16,656						40,000	5	5	5	68,992	60,215	110,164
1			7,675														
			1,800 77														
			2,250														
			6,000														
1			17,802									1			17,802		
															(75,000)		
	1	1		5,475	7,469												
	1	1		5,475	7,469												
	1	1		4,500	6,150												
	1	1		4,500	6,150												
				19,950	27,238												
				752 198	1,000 272												
				3,600	3,000												
											44,000						
				8,000	8,000												
	4	4		32,500	39,510						44,000		4	4		32,500	83,510
																(217,000)	(217,000)

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE IV		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	MATERNAL AND CHILD HEALTH		
												<u>Peru-10, Maternal and Child Health and Related Health Services</u> (For text see page 26)		
												<u>Fellowships</u>		
												TOTAL - PERU		
												<u>VENEZUELA</u>		
												VENEREAL DISEASES AND TREPONEMATOSES		
												<u>Venezuela-52, Venereal Diseases Laboratory</u> (For text see page 26)		
												Serologist, .650		P3
												<u>Allowances</u>		
												Project Service		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
1	1		4,376	2,133										
			4,440	2,220										
			514	267										
			44	21										
			2,400	503										
1	1		11,776	5,144										
												<u>Estimated Government Contribution</u>		
												ENDEMO-EPIDEMIC DISEASES		
												<u>Venezuela-5, Onchocerciasis Investigation</u> (For text see page 27)		
									2,100			Short-term Consultants		
									1,800			-Fees		
												-Travel		
									3,900					
												PUBLIC HEALTH ADMINISTRATION		
												<u>Venezuela-1, Local Health Services</u> (For text see page 27)		
												Public Health Administrator, 4.671		Pl
												Public Health Engineer, 4.672		Pl
												Public Health Nurse, 4.673		P3
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
			5,600												5,600		
1	4	4	23,402	32,500	39,510						44,000	1	4	4	23,402	32,500	83,510
												1	1		11,776	5,144	
															(15,000)	(15,000)	
															3,900		
1	1	1	2,433	7,375	7,600												
1	1	1	3,042	7,394	7,619												
1	1	1	2,000	6,067	6,267												
			7,475	20,836	21,486												
			273	750	750												
			74	209	215												
			1,130	1,130	1,130												
			2,700	750	2,250												
									50,000								
			12,000	12,000	12,000												
3	3	3	23,652	35,675	37,831					50,000		3	3	3	23,652	85,675	37,831
															(300,000)	(300,000)	(300,000)

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
												ZONE IV		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Venezuela-4, Public Health Administration Fellowships (For text see page 27)		
												Fellowships		
												MATERNAL AND CHILD HEALTH		
												Venezuela-6, School Health Services (For text see page 27)		
												Supplies and Equipment		
1	1		11,776	5,144					3,900			TOTAL - VENEZUELA		
												INTER-COUNTRY PROGRAMS		
												ENDEMO-EPIDEMIC DISEASES		
												AMRO-74, Plague Investigation (For text see page 27)		
1	1		7,375	7,600								Plague Investigation Expert, .996		Pl.
												Allowances		
			372 200 74	344 200 76								Project Service Dependents' Staff Insurance		
												Travel and Transportation		
			313	1,200 200								Duty Initial Recruitment and Repatriation		
1	1		8,334	9,620										
												AMRO-83, Typhus Control (Bolivia, Peru) (For text see page 28)		
1	1		9,000	9,250								Medical Officer, .1014		Pl.
												Short-term Consultants -Fees -Travel		
												Allowances		
			1,486 1,400 1,730 1,260 90	1,776 1,600 406 1,295 93								Project Service Dependents' Repatriation Grant Pension Fund Staff Insurance		
												Travel and Transportation		
			3,000	1,000 1,250								Duty Initial Recruitment and Repatriation		
			850									Supplies and Equipment		
			2,550		3,800							Fellowships		
1	1		21,366	16,670	7,700							Estimated Government Contribution		
2	2		29,700	26,290	7,700							TOTAL - INTER-COUNTRY PROGRAMS		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
												ZONE V		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	10,900	11,200	11,300							<div>ZONE OFFICE (For text see page 12)</div> <div>Zone Representative, .700 Public Health Engineer, .702 Administrative Officer, .705 Secretary, .707 Accounting Clerk, .706 Clerk-Stenographer, .708 Clerk, .709 Office Assistant, .710 Chauffeur, .711 Janitor, .712</div> <div>Cost of Posts</div> <div>Allowances</div> <div>Dependents' Repatriation Grant Pension Fund Staff Insurance</div> <div>Travel and Transportation</div> <div>Duty Home Leave</div> <div>Hospitality</div> <div>Common Services</div> <div>Space and Equipment Services Other Services Supplies and Materials Fixed Charges and Claims Acquisition of Capital Assets</div>		
1	1	1	8,104	8,354	8,604									
1	1	1	6,400	6,625	6,850									
1	1	1	2,209	2,419	2,523									
1	1	1	1,556	1,625	1,694									
1	1	1	1,521	1,590	1,659									
1	1	1	1,400	1,504	1,573									
1	1	1	1,090	1,141	1,193									
1	1	1	778	812	847									
1	1	1	560	585	611									
			34,518	35,855	36,854									
			800	800	800									
			1,864	1,092	1,264									
			4,833	5,020	5,159									
			345	358	368									
			3,600	3,600	3,600									
			5,180	1,820	5,180									
			200	200	200									
			1,970	1,970	1,970									
			3,650	3,650	3,650				320	320	320			
			400	400	400									
			140	140	140									
			500	2,500	500									
10	10	10	58,000	57,405	60,085				320	320	320	TOTAL		
												<div>BRAZIL</div> <div>VENEREAL DISEASES AND TREPONEMATOSES</div> <div>Brazil-20, Yaws Eradication (For text see page 28)</div> <div>Medical Officer</div> <div>Allowances</div> <div>Dependents' Staff Insurance</div> <div>Travel and Transportation</div> <div>Initial Recruitment and Repatriation Home Leave</div> <div>Supplies and Equipment</div> <div>Fellowships</div> <div>Estimated Government Contribution</div>		

[illegible]

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE V		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ENDENO-EPIDEMIC DISEASES		
												Brazil-8, Immuno - and Histo-Chemistry Demonstration (For text see page 28)		
												Chemist		Pl
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Initial Recruitment and Repatriation		
												Estimated Government Contribution		
			4,000									Brazil-17, Hydatidosis Control (For text see page 28)		
												Fellowships		
												Estimated Government Contribution		
												Brazil-21, Trachoma Control (For text see page 29)		
												Medical Eye Specialist		Pl
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Initial Recruitment and Repatriation		
												Supplies and Equipment		
												Estimated Government Contribution		
1	1	1	1,725	1,800	1,800							Brazil-51, Yellow Fever Laboratory (For text see page 29)		
												Consultant, .714		
												Allowances		
			17	18	18							Staff Insurance		
			5,000	5,000	5,000							Supplies and Equipment		
1	1	1	6,742	6,818	6,818									
												Estimated Government Contribution		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
		1			4,259												
					143												
					43												
					900												
		1			5,345									1			5,345
																	(15,000)
				4,000	4,000										4,000	4,000	4,000
																(50,000)	(50,000)
		1			3,650												
					125												
					37												
					900												
											34,000						
		1			4,712						34,000			1			38,712
																	(35,000)
												1	1	1	6,742	6,818	6,818
															(200,000)	(60,000)	(75,000)

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE V		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Brazil-53, Schistosomiasis (For text see page 29)		Pl
												Seconded Experts, U.S.P.H.S.		
												<u>Allowances</u>		
			84	42								Staff Insurance		
												<u>Travel and Transportation</u>		
			1,500	750								Duty		
			540	500								Initial Recruitment and Repatriation		
				1,000								Household Goods		
			5,000									<u>Fellowships</u>		
			7,124	2,292								<u>Estimated Government Contribution</u>		
												PUBLIC HEALTH ADMINISTRATION		
												Brazil-16, Public Health Administration		
												<u>Fellowships</u> (For text see page 29)		
												<u>Fellowships</u>		
												Brazil-18, National Drug Service (For text see page 29)		
						1	1		1,217	7,337		Drug Control Specialist		
												<u>Allowances</u>		
									170	1,009		Project Service		
									42	250		Dependents'		
									12	73		Staff Insurance		
												<u>Travel and Transportation</u>		
									1,500	800		Initial Recruitment and Repatriation		
									1,600	2,500		<u>Fellowships</u>		
						1	1		4,541	11,969		<u>Estimated Government Contribution</u>		
												NURSING		
												Brazil-22, Nursing Education (For text see page 29)		
												Nurse Educator		
												<u>Allowances</u>		
												Dependents'		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												<u>Estimated Government Contribution</u>		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															7,124	2,292	
															(85,000)	(100,000)	
			4,200		4,000										4,200		4,000
												1	1		4,541	11,969	
															(500,000)	(120,000)	
	1	1		4,500	6,150												
				188 45	250 62												
				900	800												
	1	1		5,633	7,262								1	1		5,633	7,262
																(10,000)	(10,000)

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE V		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	MATERNAL AND CHILD HEALTH		P4
												<u>Brazil-3, Maternal and Child Health</u> (For text see page 30)		
												<u>Supplies and Equipment</u>		
										8,000	8,000	<u>Fellowships</u>		
										8,000	8,000			
												<u>Estimated Government Contribution</u>		
												<u>Brazil-23, School Health Services</u> (For text see page 30)		
												<u>Supplies and Equipment</u>		
												ENVIRONMENTAL SANITATION		P4
												<u>Brazil-12, Municipal Refuse Disposal</u> (For text see page 30)		
												Sanitary Engineer		
												<u>Allowances</u>		
												Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Initial Recruitment and Repatriation		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												OTHER PROJECTS		P4
												<u>Brazil-19, School of Public Health</u> (For text see page 30)		
							1				7,300	Professor of Public Health		
										2,800	2,800	Short-term Consultants		
										2,400	2,400	-Fees		
												-Travel		
												<u>Allowances</u>		
											1,010	Project Service		
											250	Dependent's		
											73	Staff Insurance		
												<u>Travel and Transportation</u>		
											1,500	Initial Recruitment and Repatriation		
											9,000	<u>Fellowships</u>		
							1			5,200	24,333			
												<u>Estimated Government Contribution</u>		
1	1	1	17,866	9,110	6,818	1	1	1	4,541	25,169	32,333	TOTAL - BRAZIL		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
1	1	1	10,900	11,200	11,300	1	1	1	7,874	8,062	8,312	ZONE OFFICE (For text see page 12)		
1			1,938									Zone Representative, .800		D1
1	1	1	9,000	9,250	9,500							Medical Officer, .804, 4.802		Pl
1	1	1	6,588	6,813	7,038							Public Health Veterinarian, .801		Pl
1	1	1	6,475	6,700	6,925							Public Health Nurse, .805		P3
1	1	1	4,393	4,650	4,907							Administrative Officer, .806		P3
1	1	1	2,814	3,029	3,243							Accountant, .807		BAL7
1	1	1	3,136	3,350	3,564							Accounting Clerk, .836		BAL5
3	3	3	6,569	7,085	7,601							Secretary, .808		BAL5
1	1	1	1,407	1,493	1,579							Clerk Stenographer, .809, .810, .843		BAL4
1	1	1	1,414	1,500	1,586							Clerk Typist, .811		BAL3
1	1	1	1,293	1,379	1,465							File Clerk, .812		BAL3
1	1	1	1,207	1,293	1,379							Chauffeur, .813		BAL2
												Messenger, .814		BAL1
			57,134	57,742	60,087				7,874	8,062	8,312	Cost of Posts		
												<u>Allowances</u>		
			3,800	3,850	4,000				200			Dependents'		
			2,322	1,307	1,462				100	100	100	Repatriation Grant		
			7,999	8,084	8,412				1,102	1,129	1,164	Pension Fund		
			571	577	601				79	80	83	Staff Insurance		
												<u>Travel and Transportation</u>		
			6,000	6,000	6,000				2,000	2,000	2,000	Duty		
			560	1,525	4,260					1,150		Home Leave		
									2,056			Initial Recruitment and Repatriation		
									4,144			Household Goods		
			200	200	200							<u>Hospitality</u>		
												<u>Common Services</u>		
			8,740	8,740	8,740							Space and Equipment Services		
			8,700	8,700	8,700				320	320	320	Other Services		
			1,610	1,610	1,610							Supplies and Materials		
			330	330	330							Fixed Charges and Claims		
			3,000	500	500							Acquisition of Capital Assets		
15	14	14	100,966	99,165	104,902	1	1	1	17,875	12,841	11,979	TOTAL		
												<u>ARGENTINA</u>		
												MALARIA AND INSECT CONTROL		
												<u>Argentina-51, Aedes aegypti Eradication</u> (For text see page 30)		
1	1	1	4,258	7,431	7,656							Medical Officer, .815		Pl
2	2	2	5,600	9,834	10,234							Sanitary Inspector, .837		P2
			9,858	17,265	17,890							Cost of Posts		
												<u>Allowances</u>		
			3,150	5,400	5,400							Project Service		
			917	1,400	1,400							Dependents'		
			79	172	179							Staff Insurance		
												<u>Travel and Transportation</u>		
			750	4,331	4,331							Duty		
			3,744		2,425							Initial Recruitment and Repatriation		
				3,000	3,000							Home Leave		
												<u>Supplies and Equipment</u>		
3	3	3	18,518	31,568	34,625							<u>Estimated Government Contribution</u>		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE	
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES						
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957				
			\$	\$	\$				\$	\$	\$	PUBLIC HEALTH ADMINISTRATION		P4	
							1	1				<u>Argentina-4, Malbran Institute</u> (For text see page 31)			
										7,300	7,525	Scientist			
									1,400 1,200			Short-term Consultants -Fees -Travel			
												<u>Allowances</u>			
										1,800 250 73	1,800 250 75	Project Service Dependents' Staff Insurance			
												<u>Travel and Transportation</u>			
										1,500	750	Initial Recruitment and Repatriation Home Leave			
										1,500	1,500	<u>Supplies and Equipment</u>			
										4,000	8,000	<u>Fellowships</u>			
							1	1	2,600	16,423	19,900				
												<u>Estimated Government Contribution</u>		P4 P4 P3	
												<u>Argentina-7, Local Health Services</u> (For text see page 31)			
												Public Health Administrator Sanitary Engineer Public Health Nurse			
												Cost of Posts			
												<u>Allowances</u>			
												Dependents' Staff Insurance			
												<u>Travel and Transportation</u>			
												Initial Recruitment and Repatriation			
												<u>Supplies and Equipment</u>			
												<u>Fellowships</u>			
												<u>Estimated Government Contribution</u>		P4 P4 P3	
												NURSING			
												<u>Argentina-3, Nursing Education</u> (For text see page 31)			
									1,000	1,000	1,000	<u>Supplies and Equipment</u>			
									4,000	8,000	8,000	<u>Fellowships</u>			
									5,000	9,000	9,000				
												<u>Estimated Government Contribution</u>			
												OTHER PROJECTS			
												<u>Argentina-5, Library, National University Medical School</u> (For text see page 31)			
						1	1		2,700	4,000		Librarian, 4.844			P3

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	Argentina-5, (continued)		
									76	250		<u>Allowances</u>		
									27	40		Dependents' Staff Insurance		
									500			<u>Supplies and Equipment</u>		
						1	1		3,303	4,290		<u>Estimated Government Contribution</u>		
3	3	3	18,518	31,568	34,625	1	2	1	10,903	29,713	28,900	TOTAL - ARGENTINA		
												<u>CHILE</u>		
												VENEREAL DISEASES AND TREPONEMATOSIS		
												<u>Chile-11, Cardiolipin Production Center</u> (For text see page 31)		
									3,920			<u>Supplies and Equipment</u>		
									2,500			<u>Fellowships</u>		
									6,420			<u>Estimated Government Contribution</u>		
												ENDEMO EPIDEMIC DISEASES		
												<u>Chile-14, Rabies Control</u> (For text see page 32)		
			2,000									Grants		
												<u>Estimated Government Contribution</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Chile-16, Rural Health Services</u> (Linares) (For text see page 32)		
												<u>Supplies and Equipment</u>		
												<u>Chile-18, Public Health Administration</u> <u>Fellowships</u> (For text see page 32)		
												<u>Fellowships</u>		
												<u>Chile-19, Food and Drug Control</u> (For text see page 32)		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												NURSING		
												<u>Chile-20, Midwifery Education</u> (For text see page 32)		
						1	1			6,000	6,200	Nurse Educator		
												<u>Allowances</u>		
										794	794	Project Service		
										250	250	Dependents'		
										60	62	Staff Insurance		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	Chile-20, (continued)		P3
			\$	\$	\$				\$	\$	\$	<u>Travel and Transportation</u>		
										1,500	750	Initial Recruitment and Repatriation Home Leave		
										1,000	1,000	<u>Supplies and Equipment</u>		
										4,000	4,000	<u>Fellowships</u>		
							1	1		13,604	13,056			
												<u>Estimated Government Contribution</u>		
												MATERNAL AND CHILD HEALTH		
												<u>Chile-12, Demonstration Center for Care of Prematures</u> (For text see page 32)		
						1	1	1	3,000	6,100	6,300	Public Health Nurse, 4.845		
									397	794	794	<u>Allowances</u>		
									125	250	250	Project Service		
									30	61	63	Dependents'		
												Staff Insurance		
									1,500		800	<u>Travel and Transportation</u>		
										250	750	Initial Recruitment and Repatriation Home Leave		
									6,500	5,000	5,000	<u>Fellowships</u>		
						1	1	1	11,552	12,455	13,957			
												<u>Estimated Government Contribution</u>		
			2,000			1	2	2	17,972	26,059	27,013	TOTAL - CHILE		
												PARAGUAY		
												MALARIA AND INSECT CONTROL		
												<u>Paraguay-1, Malaria Eradication</u> (For text see page 32)		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Supplies and Equipment</u>		
												<u>Estimated Government Contribution</u>		
												TUBERCULOSIS		
												<u>Paraguay-7, BCG Vaccination</u> (For text see page 33)		
												Medical Officer, 4.840		
												Public Health Nurse, 4.841		
												Cost of Posts		
												<u>Allowances</u>		
												Dependents'		
												Project Service		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
													1	1		13,604	13,056
																(100,000)	(200,000)
												1	1	1	11,552	12,455	13,957
															(200,000)	(75,000)	(75,000)
			7,700	32,000	8,000				70,000		55,000	1	2	2	97,672	58,059	90,013
			4,200 3,600 3,000	4,200 1,800													
			10,800	6,000											10,800	6,000	
															(10,000)	(10,000)	
						1 1	1		4,684 4,883 9,567	625 625							
									128 1,426 95	75 6							
									2,533 2,000	180 1,020							
						2	1		15,749	1,906		2	1		15,749	1,906	

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III. FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ENDEMO-EPIDEMIC DISEASES		
												<u>Paraguay-9, Leprosy Control</u> (For text see page 33)		
												Short-term Consultants		
										700	700	-Fees		
										600	600	-Travel		
												<u>Supplies and Equipment</u>		
										2,500	2,500	<u>Fellowships</u>		
										3,800	3,800			
												<u>Estimated Government Contribution</u>		
												PUBLIC HEALTH ADMINISTRATION		
												<u>Paraguay-10, Public Health Services</u> (For text see page 33)		
												Medical Officer, 4.830		Ph
												Maternal and Child Health Adviser, 4.825		Ph
												Public Health Educator, 4.832		Ph
												Sanitary Engineer, 4.831		Ph
												Medical Bacteriologist, 4.822		Ph
												Serologist, 4.829		P3
												Public Health Nurse, 4.823		P3
												Pediatric Nurse, 4.839		P3
												Public Health Nurse, 4.826		P2
												X-Ray Technician, 4.824		P2
												Sanitarian, 4.833		P2
												Cost of Posts		
												<u>Allowances</u>		
												Project Service		
												Dependents'		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												Household Goods		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												OTHER PROJECTS		
												<u>Paraguay-6, Department of Preventive Medicine, School of Medicine</u> (For text see page 33)		
						1			1,333			Professor of Public Health, 4.835		Ph
									50			<u>Allowances</u>		
									336			Project Service		
									13			Dependents'		
												Staff Insurance		
									1,845			<u>Travel and Transportation</u>		
									1,000			Initial Recruitment and Repatriation		
												<u>Supplies and Equipment</u>		
						1			4,577					
												<u>Estimated Government Contribution</u>		
						1			4,577	3,800	3,800	TOTAL - PARAGUAY		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	<u>URUGUAY</u>		
1	1											MALARIA AND INSECT CONTROL		P2
												<u>Uruguay-51, Aedes aegypti Eradication</u> (For text see page 33)		
												Sanitarian, .842		
												<u>Allowances</u> Project Service Dependents' Staff Insurance		
												<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave		
1	1		9,000	8,851										
												<u>Estimated Government Contribution</u>		
												<u>ENDEMO-EPIDEMIC DISEASES</u>		
												<u>Uruguay-6, National Zoonosis Institute</u> (For text see page 34)		
											1,000	<u>Supplies and Equipment</u>		
											4,000	<u>Fellowships</u>		
											5,000			
												<u>Estimated Government Contribution</u>		
												<u>PUBLIC HEALTH ADMINISTRATION</u>		
												<u>Uruguay-5, Rural Health Services</u> (For text see page 34)		
												Public Health Administrator, 4.846 Sanitary Engineer, 4.847 Public Health Nurse, 4.848 Nurse Educator		Pl Pl P3 P3
												Cost of Posts		
												<u>Allowances</u> Dependents' Staff Insurance		
												<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
1	1		9,000	8,851							5,000	TOTAL - URUGUAY		
												<u>INTER-COUNTRY PROGRAMS</u>		
												<u>VENEREAL DISEASES AND TREPONEMATOSES</u>		
												<u>AMRO-66, Seminar on Venereal Diseases</u> (For text see page 34)		
											1,000	<u>Supplies and Equipment</u>		
											5,050	<u>Participants</u>		
											6,050			

[illegible]

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS ZONE VI		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	ENDMO-EPIDEMIC DISEASES		
				500	4,000							AMRO-43, Hydatidosis Control (For text see page 34)		
												Supplies and Equipment		
			4,000	12,000	8,000							Fellowships		
			2,000	2,000	2,000							Grant		
			6,000	14,500	14,000									
												Estimated Government Contribution		
												AMRO-84, Zoonosis Control (For text see page 34)		
												Fellowships		
			6,000	14,500	14,000						6,050	TOTAL - INTER-COUNTRY PROGRAMS		
PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	MALARIA AND INSECT CONTROL		Ph
												AMRO-88, Adviser on Aedes aegypti Eradication (For text see page 34)		
1	1	1	9,115	9,384	9,652							Medical Officer, .1017		
			2,400	2,100	2,100							Short-term Consultants -Fees -Travel		
			1,285	1,200	1,200							Allowances		
			360	376	406							Repatriation Grant Pension Fund Staff Insurance		
			1,187	1,222	1,257							Travel and Transportation		
			36	90	90							Duty Home Leave		
			4,000	4,098	4,161							Supplies and Materials		
			200	200	200									
1	1	1	18,633	20,510	19,066									
												AMRO-90, Eradication of Malaria (COMEP) (For text see page 35)		Ung Ph Ph Ph Ph ML6 ML6 ML5 ML5 ML5 ML2
1	1			12,000	12,000							Medical Officer, .1023		
1	1			7,450	7,675							Entomologist, .1071		
1	1			7,875	8,125							Parasitologist, .1072		
1	1			7,413	7,638							Epidemiologist, .1073		
1	1			7,413	7,638							Sanitary Engineer, .1074		
1	1			1,725	1,793							Statistical Clerk, .1075		
1	1			1,719	1,788							Supervising Clerk, .1076		
1	1			1,437	1,493							Clerk Stenographer, .1077		
1	1			1,437	1,493							Filing Clerk, .1078		
2	2			2,856	2,968							Clerk, .1079, .1080		
1	1			615	813							Chauffeur Messenger, .1081		
				51,940	53,424							Cost of Posts		
				4,640	4,640							Allowances		
				2,200	2,200							Project Service		
				241	250							Dependents'		
				518	534							Pension Fund Staff Insurance		

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
									19,867 9,240								
									9,408 6,225								
						12			a) 83,797			12	12	12	83,797	100,000	100,000
												1			4,632		
																	15,370
						2	2	2	9,120 1,800	14,881 3,600	15,331						
									10,920	18,481	15,331						
									2,100 1,800	2,100 1,800							
									4,392 1,050 110	7,584 1,800 185	4,992 1,200 153						
									5,878	700	2,800						
									49,365	13,310	8,028						
									4,745	23,000							
						3	3	2	180,360	168,960	132,504	3	3	2	80,360	68,960	32,504

1/ Amounts totalling \$219,089 were allocated by the IV Directing Council and the XIV Pan American Sanitary Conference of which \$37,265 were obligated through 31 December 1954 leaving a balance of \$181,824 which is budgeted over a period of three years.

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$	1	1	1	\$	\$	\$	AMRO-61, Rabies Control (For text see page 36)		Pl Pl
									6,955	7,506	376 7,300	Mammalogist, 4.1018 Rabies Adviser		
									6,955	7,506	7,676	Cost of Posts		
									500	500	500	Short-term Consultants -Travel		
												<u>Allowances</u>		
									763 69	800 75	1,152 290 76	Project Service Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
									4,900 600	4,900	4,000 1,900	Duty Initial Recruitment and Repatriation		
									2,300	500	3,000	<u>Supplies and Equipment</u>		
									6,000		6,000	<u>Fellowships</u>		
						1	1	2	22,087	14,281	24,594			
												AMRO-76, Vaccine Testing (For text see page 36)		P5 Pl Pl P2
									3,730	3,730	3,730	<u>Grant</u>		
												AMRO-81, Pan American Zoonoses Center (For text see page 36)		
												Center Director Epidemi-Epizootiologist Comparative Pathologist Administrative Officer		
												Cost of Posts		
												Short-term Consultants -Fees -Travel		
												<u>Allowances</u>		
												Project Service Dependents' Staff Insurance		
												<u>Travel and Transportation</u>		
												Duty Initial Recruitment and Repatriation		
												<u>Supplies and Equipment</u>		
												<u>Contractual Services</u>		
												<u>Contingencies</u>		
												<u>Fellowships</u>		
												AMRO-91, Seminar on Application of International Sanitary Regulations (For text see page 37)		
									2,460			<u>Duty Travel</u>		
									500	500		<u>Supplies and Equipment</u>		
									6,840	12,000		<u>Participants</u>		
									9,800	12,500				

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$ 1,000	\$	\$				\$	\$	\$	AMRO-92, Poliomyelitis (For text see page 37)		
												Other Contractual Services		
											4,000	Supplies and Equipment		
											8,000	Fellowships		
			1,000								12,000			
												AMRO-96, Plague Training Course (For text see page 37)		
											2,400	Duty Travel		
											1,400	Short-term Consultants		
											1,200	-Fees		
												-Travel		
											1,500	Supplies and Equipment		
											6,000	Fellowships		
											12,500			
												PUBLIC HEALTH ADMINISTRATION		
												AMRO-6, Joint Field Mission on Indigenous Populations (For text see page 37)		
												Public Health Administrator, 4.1022		Pl
												Allowances		
												Dependents' Staff Insurance		
												Travel and Transportation		
												Initial Recruitment and Repatriation Home Leave		
												AMRO-10, Inter-American Center of Biostatistics (For text see page 37)		
												Expert on Hospital Statistics, 4.912		Pl
												Assistant Coordinator, 4.914		P3
												Translator, 4.979		CL4
												Secretary, 4.980		CL3
												Technician, 4.915		CL2
												Cost of Posts		
												Short-term Consultants		
												-Fees		
												-Travel		
												Allowances		
												Project Service		
												Dependents'		
												Repatriation Grant		
												Pension Fund		
												Staff Insurance		
												Travel and Transportation		
												Duty		
												Initial Recruitment and Repatriation		
												Home Leave		
												Supplies and Equipment		
												Fellowships		
												Grants		

U. N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						T O T A L S					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															1,000		12,000
																	12,500
2	2	2	10,160	14,918	15,368												
			483 101	650 149	650 153												
			2,558	250	2,250												
2	2	2	13,302	15,967	18,421							2	2	2	13,302	15,967	18,421
1 1 1 1 1	1	1	8,896 7,300 1,485 938 860	9,146	9,396												
			19,479	9,146	9,396												
			4,200 3,600	4,200 3,600	4,200 3,600												
			1,608 783 100 1,481 191	804	804												
			500 1,500 1,225		1,225												
			20,000	5,000	5,000												
			32,100	30,500	36,400												
				15,000	15,000												
5	1	1	86,767	68,340	75,718							5	1	1	86,767	68,340	75,718

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	INTER-ZONE		
			\$	\$	\$				\$	\$	\$	<u>AMRO-45, Laboratory Biological Facilities</u> (For text see page 38)		P3 P2
									4,200	4,200	4,200	Short-term Consultants		
									3,600	3,600	3,600	-Fees		
									400	400	400	-Travel		
									2,000	4,000	4,000	<u>Supplies and Equipment</u>		
									10,200	12,200	12,200	<u>Fellowships</u>		
												<u>AMRO-85, Latin American Center for Classification of Diseases</u> (For text see page 38)		
									1,000	1,000	1,000	<u>Supplies and Equipment</u>		
									6,000	6,000	6,000	<u>Fellowships</u>		
									7,000	7,000	7,000			
						1	1	1	6,440	6,662	6,887	<u>AMRO-86, Health Statisticians</u> (For text see page 38)		P3 P2
							1	1		6,000	6,200	Statistician, 4.1016		
									6,440	12,662	13,087	Statistician		
												Cost of Posts		
									1,536	2,664	2,664	<u>Allowances</u>		
									600	850	850	Project Service		
									64	126	130	Dependents'		
									4,970	7,008	7,039	Staff Insurance		
									780	1,500	750	<u>Travel and Transportation</u>		
										300		Duty		
						1	2	2	14,390	25,110	24,520	Initial Recruitment and Repatriation		P5 EML3
												Home Leave		
1	1	1	9,700	10,000	10,300							<u>FIELD OFFICE</u> (For text see page 38)		
2	2	2	5,042	5,214	5,396							Area Supervisor, .334		
			609	750	773							Clerk Stenographer, .326, .327		
			15,351	15,964	16,469							Cost-of-Living Adjustment		
												Cost of Posts		
												<u>Allowances</u>		
			400	400	400							Dependents'		
			2,063	2,130	2,198							Pension Fund		
			147	152	157							Staff Insurance		
			2,500	2,500	2,500							<u>Travel and Transportation</u>		
			700									Duty		
			100	100	100							Home Leave		
												<u>Hospitality</u>		
												<u>Common Services</u>		
			225	225	225							Space and Equipment		
			720	720	720							Other Services		
			300	300	300							Supplies and Materials		
			160	160	160							Fixed Charges and Claims		
			300	300	2,000							Acquisition of Capital Assets		
			1,813	1,905	1,995							Reimbursement of Income Tax		
3	3	3	24,779	24,856	27,224									

U.N. TECHNICAL ASSISTANCE						OTHER EXTRA BUDGETARY FUNDS						TOTALS					
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	55	56	57	1955	1956	1957
			\$	\$	\$				\$	\$	\$				\$	\$	\$
															10,200	12,200	12,200
															7,000	7,000	7,000
												1	2	2	11,390	25,110	24,520
												1	1	1	9,700	10,000	10,300
												2	2	2	5,042	5,214	5,396
															609	750	773
															15,351	15,964	16,469
															400	400	400
															2,063	2,130	2,198
															147	152	157
															2,500	2,500	2,500
															700		
															100	100	100
															225	225	225
															720	720	720
															300	300	300
															160	160	160
															300	300	2,000
															1,813	1,905	1,995
												3	3	3	24,779	24,856	27,224

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$			
										2,500		NURSING		
												AMRO-23.4, Fourth Regional Nursing Congress (For text see page 38)		
												Supplies and Equipment		
												Estimated Government Contribution		
												AMRO-28, Advanced Nursing Education (For text see page 38)		
						1	1			6,000	6,200	Nurse Educator		
												Allowances		
										800	800	Project Service		
										250	250	Dependents'		
										60	62	Staff Insurance		
												Travel and Transportation		
										1,500		Initial Recruitment and Repatriation		
											750	Home Leave		
									3,000	2,000	2,000	Supplies and Equipment		
									12,000	4,000	12,500	Fellowships		
							1	1	15,000	14,610	22,562			
												AMRO-46, Workshop on Nursing Education (For text see page 39)		
			900								1,050	Short-term Consultants		
											900	-Fees		
												-Travel		
												Supplies and Materials		
											10,500	Fellowships		
			900								12,450			
												HEALTH EDUCATION OF THE PUBLIC		
												AMRO-93, Health Education (For text see page 39)		
						1	2	2	3,650	15,600	16,074	Public Health Educator, 4.921, 4.670		
									540	2,664	2,664	Allowances		
									125	1,250	1,250	Project Service		
									36	156	160	Dependents'		
												Staff Insurance		
									1,500			Travel and Transportation		
										1,475	750	Initial Recruitment and Repatriation		
												Home Leave		
						1	2	2	5,851	21,145	20,898			
												MATERNAL AND CHILD HEALTH		
												AMRO-94, Control of Diarrheal Diseases in Childhood (For text see page 39)		
				2,800	2,800							Short-term Consultants		
				2,400	2,400							-Fees		
												-Travel		
				1,000	1,000							Common Services		
				10,000	10,000							Participants		
				500	500							Conference Services		
				16,700	16,700									

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	MENTAL HEALTH		
												<u>AMRO-9.2, Seminar on Mental Health</u> (For text see page 39)		
									2,140			Short-term Consultants		
									4,200			-Fees		
									100			-Travel		
									19,000			<u>Supplies and Equipment</u>		
									25,440			<u>Participants</u>		
												ENVIRONMENTAL SANITATION		
												<u>AMRO-1, Environmental Sanitation Training (Brazil, Chile, Mexico)</u> (For text see page 39)		
						1	1		4,259	3,042		Professor of Sanitary Engineering, 4.1019		
									368	263		<u>Allowances</u>		
									234	166		Project Service		
									42	30		Dependents'		
												Staff Insurance		
									3,730	2,000		<u>Travel and Transportation</u>		
									5,000	10,000	10,000	Initial Recruitment and Repatriation		
									52,700	46,450	59,000	<u>Supplies and Equipment</u>		
						1	1		66,333	61,951	69,000	<u>Fellowships</u>		
												<u>AMRO-17, Waterworks Training Course</u> (For text see page 40)		
									4,200	4,200	8,400	Short-term Consultants		
									3,600	3,600	7,200	-Fees		
												-Travel		
										1,440	2,880	<u>Supplies and Equipment</u>		
									5,000	5,000	10,000	<u>Fellowships</u>		
									12,800	14,240	28,480	<u>Estimated Government Contribution</u>		
												<u>AMRO-50, Fluoridation of Water</u> (For text see page 40)		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		
												<u>AMRO-62, Housing Sanitation</u> (For text see page 40)		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		
												<u>Estimated Government Contribution</u>		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	AMRO-64, Seminar on Sanitary Engineer- ing (For text see page 40)		
												Travel and Transportation		
												Duty		
												Supplies and Equipment		
												Participants		
												Estimated Government Contribution		
												AMRO-97, Seminar on Training of Sani- tary Inspectors (For text see page 40)		
												Travel and Transportation		
												Duty		
												Supplies and Equipment		
												Conference Services		
												Participants		
												OTHER PROJECTS		
												AMRO-18, Medical and Public Health Education (For text see page 41)		
									4,200	4,200	4,200	Short-term Consultants		
									3,600	3,600	3,600	-Fees		
												-Travel		
									10,000	5,400	10,400	Supplies and Equipment		
									37,800	35,000	30,000	Fellowships		
									55,600	48,200	48,200			
			60,170	56,932	64,520							AMRO-35, Fellowships (Unspecified) (For text see page 41)		
												Fellowships		
												AMRO-43, Seminar on Teaching of Public Health in Schools of Veterinary Medicine (For text see page 41)		
											2,800	Short-term Consultants		
											2,400	-Fees		
												-Travel		
											250	Supplies and Equipment		
											10,000	Participants		
											15,450			
												AMRO-49, Seminar on Teaching of Pre- ventive Medicine (For text see page 41)		
									1,574	1,400		Short-term Consultants		
									4,359	1,200		-Fees		
												-Travel		
												Travel and Transportation		
									977	1,000		Duty		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	AMRO-49, (continued)		
									1,000	1,000		<u>Supplies and Equipment</u>		
									2,000	2,100		<u>Contractual Services</u>		
									25,090	15,100		<u>Participants</u>		
									35,000	21,800				
												AMRO-67, Veterinary Medicine Education (For text see page 41)		
									3,500		4,200	Short-term Consultants		
									3,000		3,600	-Fees		
									5,300			-Travel		
												<u>Fellowships</u>		
									11,800		7,800			
												AMRO-68, Survey of Pediatric Education (For text see page 42)		
									4,200			Short-term Consultants		
									3,600			-Fees		
									1,000			-Travel		
									8,800			<u>Supplies and Equipment</u>		
												AMRO-75, Statistical Education (For text see page 42)		
												Short-term Consultants		
												-Fees		
												-Travel		
												<u>Supplies and Equipment</u>		
												<u>Fellowships</u>		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III FIELD AND OTHER PROGRAMS INTER-ZONE		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES					
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957			
			\$	\$	\$				\$	\$	\$	AMRO-77, (continued)		
												<u>Allowances</u> Project Service Dependents' Pension Fund Staff Insurance		
												<u>Travel and Transportation</u> Duty Initial Recruitment and Repatriation Home Leave		
												<u>Supplies and Equipment</u>		
												<u>Common Services</u>		
												<u>Fellowships</u>		
												<u>Participants</u>		
												<u>Contingencies</u>		
												<u>Estimated Government Contribution</u>		
4	16	16	105,482	218,998	247,110	5	7	7	308,463	259,267	336,754	TOTAL - INTER-ZONE PROGRAMS		

PAN AMERICAN SANITARY BUREAU						WORLD HEALTH ORGANIZATION						PART III		GRADE
NUMBER OF POSTS			ESTIMATED EXPENDITURES			NUMBER OF POSTS			ESTIMATED EXPENDITURES			FIELD AND OTHER PROGRAMS		
												PUBLICATIONS OF THE PASB		
												(For text see page 42)		
55	56	57	1955	1956	1957	55	56	57	1955	1956	1957	Ch. 1. PASB Bulletin Ch. 2. Weekly and Quarterly Epidemic- 		

Ch. 1. PASB Bulletin
Ch. 2. Weekly and Quarterly Epidemic-
logical Report
Ch. 3. Special Publications
Ch. 4. AIDIS Journal

