

# 24th PAN AMERICAN SANITARY CONFERENCE

Washington, D.C., USA, 26 - 30 September 1994

# XXIV Pan American Sanitary Conference RESOLUTIONS

CSP24.R1 The XXIV Pan American Sanitary Conference,

Having considered the report of the Director on the collection of quota contributions (Document CSP24/22 and Add. I) and the comments expressed by the Executive Committee at its 113th Meeting1 with respect to the status of the collection of quota contributions;

Noting the report of the working party on the application of Article 6.B of the PAHO Constitution relating to the suspension of voting privileges of Member Governments that fail to meet their financial obligations to the Organization; and

Recognizing that, in the case of the three Member Governments subject to Article 6.B. Bolivia and Cuba had submitted formal written commitments to amortize their quota arrearages within a fixed number of years, and Haiti was not presently represented at this Conference,

- 1. To take note of the report of the Director on the collection of quota contributions (Document CSP24/22 and Add. I).
- 2. To express appreciation to Member Governments that have already made payments in 1994, and to urge all Member Governments in arrears to promptly meet their financial obligations to the Organization.
- 3. To congratulate Guyana for its successful payment efforts in fully meeting its quota obligations through 1994.

- 4. To recognize the efforts of the new Government of Antigua and Barbuda in meeting its financial commitment to the Organization.
- 5. To approve the recommendation of the working party that the voting privileges of any Member Government subject to the application of Article 6.B be suspended until an acceptable plan of payment has been submitted to the Secretariat and to note that Bolivia and Cuba had now complied with this deferred payment requirement.
- 6. To endorse the working party's recommendation that all deferred payment plans be considered firm commitments by the countries concerned and not be modified in the future.
- 7. To request the Director to:
- (a) Continue to monitor the implementation of special payment agreements made by Member Governments in arrears for the payment of prior years' quota assessments:
- (b) Advise the Executive Committee of Member Governments' compliance with their quota payment commitments;
- (c) Report to the XXXVIII Meeting of the Directing Council on the status of the collection of quota contributions for 1995 and prior years.

September 1994 OD 266, 130

# CSP24.R2 The XXIV Pan American Sanitary Conference,

Having studied the Financial Report of the Director and the Report of the External Auditor for 1992–1993 (Official Document 261) on the accounts of the Pan American Health Organization, and taking note of the comments of the 114th Meeting of the Executive Committee on its examination of the Report;

Noting the presentation by the External Auditor on the satisfactory condition of the Organization's accounts and the Organization's continued compliance with the Financial Regulations and legislative authority; and Expressing satisfaction that the Organization has continued to follow sound financial practices and to maintain a stable fiscal standing,

#### Resolves:

- 1. To take note of the Financial Report of the Director for 1992–1993.
- 2. To congratulate the External Auditor for the thoroughness of his audit reviews during the past biennium and for presenting a clear and concise report on the condition of the Organization's accounts and accuracy of the financial statements for 1992–1993.
- 3. To express concern about the difficulties being encountered by the Organization in the implementation and operation of its new financial management system, to encourage the Director to solve these systems problems as quickly as possible, and to keep the Executive Committee informed.
- 4. To take note of the actions taken by the Director to transfer funds between parts of the 1992–1993 Effective Working Budget to meet program priorities.
- 5. To express deep concern about the financial situations that currently exist at the Caribbean Epidemiology Center and the Caribbean Food and Nutrition Institute and to request strongly that the Member Governments meet their financial commitments to these Centers as soon as possible.
- 6. To recognize the efforts made by the Institute of Nutrition of Central America and Panama to maintain the Institute in an improved financial condition.
- 7. To commend the Director for having maintained the Organization in a sound financial condition.

September 1994 OD 266, 131

CSP24.R3 The XXIV Pan American Sanitary Conference,

Having seen Document CSP24/12 (Part A), "Progress Report on the Quadrennial Targets for the Strategic Orientations and Program Priorities (SOPP), 1991–1994";

Bearing in mind Resolution CE107.R3 of the 107th Meeting of the Executive Committee (1991), which recommends that the Director use evaluation schemes to review progress made toward achievement of the quadrennial targets; and

Recognizing the need to monitor the execution and outcomes of actions taken by the Organization in terms of benefit for the population in the countries of the Region,

## Resolves:

- 1. To reaffirm the importance of the strategic orientations and program priorities as mechanisms for guiding the work of the Organization, and to encourage the Member States and the Secretariat to draw upon the lessons learned from this exercise and apply them to the strategic orientations and program priorities process in the future.
- 2. To request the Member States to provide the Bureau with the information that will enable it to monitor achievement of the quadrennial targets, and to take the necessary measures, as appropriate, to ensure that these goals are fulfilled.
- 3. To ask the Director to coordinate with the countries the establishment of mechanisms that will make it possible to monitor achievement of the quadrennial targets as part of the development of information systems.

September 1994 OD 266, 132

CSP24.R4 The XXIV Pan American Sanitary Conference,

Having seen Document CSP24/12 (Part B), "Strategic and Programmatic Orientations for the Pan American Health Organization, 1995–1998";1

Bearing in mind that it is the constitutional function of the Pan American Sanitary Conference to determine the general policies of the Organization; and

Recognizing that the Member States and the Secretariat need to channel their efforts and resources into undertakings that will improve access to health services and help to ensure that the health needs of the population in the Region are effectively met,

- 1. To adopt the "Strategic and Programmatic Orientations for the Pan American Health Organization, 1995–1998," contained in Document CSP24/12 (Part B), with the observations made, as a basic frame of reference for the planning of the activities of the Organization.
- 2. To request the Member States to bear in mind the strategic and programmatic orientations for the Organization during 1995–1998 as they formulate their national health policies.
- 3. To request the Director to:
- (a) Review and adapt the document in accordance with the observations made by the Delegates to the Conference in order to improve its presentation, and to submit it to the Subcommittee on Planning and Programming at its meeting in December 1994 for its final formal approval;
- (b) Apply the strategic and programmatic orientations to the biennial and annual operating program budgets of the Organization throughout the 1995–1998 quadrennium;
- (c) Disseminate the document "Strategic and Programmatic Orientations for the Pan American Health Organization, 1995–1998" to the Member States and transmit it to the Director-General of WHO for his consideration;
- (d) Transmit the document to multilateral organizations and donor countries' technical cooperation agencies that participate in health sector activities in the Member States.
- 4. To request the Director, in developing the strategic and programmatic orientations for the coming quadrenniums, to:
- (a) Link the strategic and programmatic orientations to the basic indicators of Health Conditions in the Americas;
- (b) Take into account the capacities and responsibilities of the Pan American Health Organization in defining its program of technical cooperation;
- (c) Ensure that the priority areas and lines of action of the strategic and programmatic orientations are reflected in the Organization's program budgets and in the definition of the categories used for programming the Organization's work during the quadrennium.

# CSP24.R5 The XXIV Pan American Sanitary Conference,

Bearing in mind Articles 4.E and 21.A of the Constitution of the Pan American Health Organization, which provide that the Pan American Sanitary Bureau shall have a Director elected at the Conference by the vote of a majority of the Governments of the Organization;

Bearing in mind Article 4 of the Agreement between the World Health Organization and the Pan American Health Organization and Article 52 of the Constitution of the World Health Organization, which establish the procedure for the appointment of Regional Directors of the World Health Organization; and

Satisfied that the election of the Director of the Bureau has been held in accordance with the established procedures,

#### Resolves:

- 1. To declare Sir George Alleyne unanimously elected Director of the Pan American Sanitary Bureau for a period of four years to begin 1 February 1995.
- 2. To submit to the Executive Board of the World Health Organization the name of Sir George Alleyne for appointment as Regional Director for the Americas.

September 1994 OD 266, 134

# CSP24.R6 The XXIV Pan American Sanitary Conference,

Noting the 25 years of service of Dr. Carlyle Guerra de Macedo of Brazil to the Pan American Health Organization;

Recognizing the extraordinary leadership provided by Dr. Macedo as Director of the Pan American Sanitary Bureau during the past 12 years; and

Desiring to demonstrate its appreciation for his many years of service to the Organization for the benefit of the people of the Americas,

#### Resolves:

To confer the title of Director Emeritus of the Pan American Sanitary Bureau on Dr. Carlyle Guerra de Macedo.

September 1994 OD 266, 135

# CSP24.R7 The XXIV Pan American Sanitary Conference,

The XXIV Pan American Sanitary Conference elected El Salvador, Saint Kitts and Nevis, and the United States of America, to the Executive Committee upon termination of the periods of office of Honduras, Peru, and Saint Vincent and the Grenadines, and thanked the Governments of these countries for the services rendered to the Organization by their representatives on the Committee.

September 1994 OD 266, 135

# CSP24.R8 The XXIV Pan American Sanitary Conference,

Having seen the proposal for convening the Pan American Conference on Health and the Environment in Sustainable Development, to be held in 1995 (Document CSP24/15);

Noting the follow-up actions recommended in Agenda 21 of the United Nations Conference on Environment and Development (UNCED), held in 1992, which considers health as it relates to the environment and development, as well as the recommendation that the countries prepare national plans for sustainable development and that such plans incorporate the components of health in general and environmental health in particular;

Bearing in mind Resolution CD36.R13 of the XXXVI Meeting of the Directing Council (1992), which requested the Director to study the feasibility of convening such a conference; and

Considering that it is urgent that the health sector have a consistent policy at the regional level which recognizes the close relationship that exists among health, the environment, and development and which facilitates the sector's active participation from the outset in the preparation of national plans for sustainable development and in the discussion, follow-up, and execution of UNCED's Agenda 21 at the national and international level,

- 1. To urge the Member States to:
- (a) Incorporate the components of health and environment in their national plans for sustainable development;
- (b) Continue to strengthen institutional capacity for the management of environmental health at all levels, including the strengthening or establishment of a high-level commission for coordinating activities for the effective implementation of actions in the areas of health and the environment;
- (c) Participate actively in the various preparatory stages of the Pan American Conference on Health and the Environment in Sustainable Development, to be held in 1995, especially in the national phase.
- 2. To request the Director to:
- (a) Ensure that the Pan American Conference on Health and the Environment in Sustainable Development will be held on 21–23 August 1995, pursuant to securing the necessary funding and acceptance by the Subcommittee on Planning and Programming of the proposed development plan;
- (b) Carry forward his negotiations with the World Bank and the Inter-American Development Bank to ensure their full cooperation in holding the conference, and also to encourage other regional, bilateral, and nongovernmental organizations concerned with the subject to participate in the Conference and incorporate health and environmental considerations in their development programs;
- (c) Continue his efforts on behalf of the countries, as requested in Resolution CD36.R13 of the XXXVI Meeting of the Directing Council, to see that their needs are met in the area of health and the environment, especially in terms of the mobilization of resources.

# CSP24.R9 The XXIV Pan American Sanitary Conference,

Having seen Document CSP24/16, "International Basic Safety Standards for Protection against Ionizing Radiation and for the Safety of Radiation Sources";

Aware of the increasing use of ionizing radiation in medical applications and its potentially deleterious effects on health;

Emphasizing the importance of international harmonization in the field of radiation safety;

Acknowledging the coordinating role of the Inter-Agency Committee on Radiation Safety (IACRS)-which comprises the Commission of the European Communities, the Food and Agriculture Organization of the United Nations (FAO), the International Atomic Energy Agency (IAEA), the International Labor Organization (ILO), the Nuclear Energy Agency (NEA) of the Organization for Economic Cooperation and Development, the United Nations Scientific Committee on the Effects of Atomic Radiation, and the World Health Organization (WHO), as well as the Pan American Health Organization (PAHO)-in preparing the aforementioned International Basic Safety Standards in light, inter alia, of the 1991 recommendations of the International Commission on Radiological Protection; and

Recognizing that, within the framework of IACRS, a joint secretariat of FAO, IAEA, ILO, NEA, WHO, and PAHO was established to prepare the International Basic Safety Standards,

- 1. To endorse the International Basic Safety Standards for Protection against Ionizing Radiation and for the Safety of Radiation Sources.
- 2. To urge the Member States to draw on the guidance provided by the International Basic Safety Standards when establishing regulations and operational criteria in the field of radiation safety.

3. To ask the Director, in accordance with the availability of resources from the Organization, to continue to cooperate with the Member States in the development and implementation of national plans on radiation safety.

September 1994 OD 266, 137

CSP24.R10 The XXIV Pan American Sanitary Conference,

Having reviewed Document CSP24/11, containing, among other things, a proposal for modification of the existing procedures and guidelines for conferring the PAHO Award for Administration;

Noting that the last revision of the procedures and guidelines took place in 1980,1 and that recent experience suggests that they should be updated; and

Considering that the Director has proposed and that the 113th Meeting of the Executive Committee has analyzed revisions to the current procedures and guidelines for conferring the Award,2

## Resolves:

- 1. To adopt the modifications to the procedures and guidelines for conferring the PAHO Award for Administration contained in Document CSP24/11.
- 2. To request the Director to communicate the revised procedures and guidelines to the Member States.

September 1994 OD 266, 138

CSP24.R11 The XXIV Pan American Sanitary Conference,

Having examined the Annual Report, 1993, and Quadrennial Report, 1990–1993, of the Director of the Pan American Sanitary Bureau (Official Document 262) on the activities of PAHO during the period between the XXIII and XXIV Pan American Sanitary Conferences; and

Taking into consideration the stipulations of Article 4.F of the Constitution of the Pan American Health Organization,

## Resolves:

- 1. To take note of the Annual Report, 1993, and Quadrennial Report, 1990–1993, of the Director of the Pan American Sanitary Bureau.
- 2. To congratulate the Director on his constant effort to transform the Report into a dynamic working tool, in order to make it a faithful reflection of PAHO's work and an instrument for evaluating the execution of the cooperation activities carried out during the respective period.
- 3. To thank the Director for the leadership and support provided to the Member Governments in the activities carried out by PAHO during the period 1990–1993.

September 1994 OD 266, 139

CSP24.R12 The XXIV Pan American Sanitary Conference,

Having considered Document CSP24/13 and the tentative request to the World Health Organization for US\$ 79,794,000 without cost increases for the Region of the Americas for the biennium 1996–1997; and

Noting the recommendation of the 113th Meeting of the Executive Committee,1

- 1. To request the Director to transmit to the Director-General of WHO the request for \$79,794,000 without cost increases for the Region of the Americas for the biennium 1996–1997, for consideration by the WHO Executive Board and the World Health Assembly in 1995.
- 2. To recommend to the members of the WHO Executive Board representing the Region of the Americas that they take the observations of the Conference on this matter into consideration in their discussion of the budget.

3. To request the Director to prepare an analytical report on the budget and distribute it to the members of the WHO Executive Board representing the Region of the Americas.

September 1994 OD 266, 139

# CSP24.R13 The XXIV Pan American Sanitary Conference,

Having seen Document CSP24/17, "Health and Peace for Development and Democracy in Central America";

Considering the progress that has been achieved in terms of the quest for harmony and peace in Central America, in which efforts in the field of health have played an important role; and

Having been informed that the X Special Meeting of the Health Sector of Central America (RESSCA) approved a third phase (1995–2000) of the Central American Health Initiative (ISCA) having as its principal reference the Central American integration process for sustainable human development.

- 1. To support the efforts under way to accelerate development and consolidate democracy in the Central American countries through actions in the field of public health, with special attention to working with the family and communities through coordinated efforts among the organizations of the sector.
- 2. To congratulate the Member Governments of Central America for approving and launching a third phase of the ISCA that will continue the joint efforts toward a common health agenda in order to take maximum advantage of opportunities for improving the living conditions of the population within the framework of the Central American integration process and greater equity, social efficacy, and efficiency in the delivery of health services.
- 3. To request the Director, within the limits of available resources, to continue to support the Central American countries in the social integration process, the

formulation and implementation of a subregional health agenda, and the corresponding mobilization of resources.

# September 1994 OD 266, 140

CSP24.R14 The XXIV Pan American Sanitary Conference,

Having seen Document CSP24/19 on the Regional System for Vaccines (SIREVA);

Considering that vaccines are fundamental instruments for the implementation of programs to control and eradicate diseases preventable by immunization;

Bearing in mind that research for the technological development of new vaccines is the responsibility of the scientific community and national institutions;

Convinced that the development of new vaccines can stimulate biotechnology as part of the technologic development process;

Considering that only through technical cooperation among countries, based on joint efforts that bring together the technical and scientific experience, capacity, and potential of their institutions through a collaborative program for development within the Regional System for Vaccines, will it be feasible to produce the needed new vaccines and to make those that are already available more safe and efficacious; and

Recognizing the importance of guaranteeing the quality of the vaccines utilized in the Region through the strengthening of the national quality control laboratories for the vaccines and their organization into a Regional Network of Quality Control Laboratories,

- 1. To urge the Member States to:
- (a) Define and give priority to a policy for the development of a regional system covering the development, production, quality control, and evaluation of vaccines of importance for public health;
- (b) Revise and adjust the targets, strategies, and principal actions relating to epidemiological research on diseases preventable by vaccination; development, production, and quality control: and evaluation of new and improved vaccines;

- (c) Promote policies and legislation that will commit national resources, mobilize investments, and foster technical, scientific, and financial cooperation among the countries of the Region in order to finance the work planned for SIREVA.
- 2. To authorize the Director to enter into negotiations and agreements with public and private institutions in order to promote the development, production, and marketing of vaccines in the Region in response to expressions of interest by the Member Governments.

# 3. To request the Director to:

- (a) Support, within the limits of available resources, the basic activities of coordination and technical and scientific cooperation among the countries in the area of research and in the development, production, and evaluation of vaccines of high priority for the control of diseases preventable by immunization;
- (b) Support, within the limits of available resources, the implementation of the Regional Network of Quality Control Laboratories, in order to guarantee the quality of the vaccines utilized in the Region:
- (c) Assist in implementing research pursuant to the guidelines contained in the master plans formulated and approved by the Expert Committees of SIREVA, or for the development of specific immunizing agents;
- (d) Promote a system for encouraging participation in research on vaccine development by as many official and private institutions as possible in the countries of the Region;
- (e) Provide affiliated laboratories with access to scientific and technical knowledge developed within the Regional System for Vaccines and related to the production of vaccines, as long as these laboratories have facilities and production infrastructures that meet international requirements, and as long as they assume responsibility for the quality and proper use of the vaccines, pursuant to the guidelines of the Expert Committees of SIREVA;
- (f) Discuss and come to an agreement on the transfer of technology among the participating parties, for which purpose PAHO/WHO will convene representatives of the Member States and the Expert Committees of SIREVA.

# CSP24.R15 The XXIV Pan American Sanitary Conference,

Considering the revision made to the base/floor salary scale for the professional and higher categories of staff in graded posts, effective 1 March 1994;

Taking into account the decision by the Executive Committee at its 113th Meeting to adjust the salaries of the Deputy Director and Assistant Director (Resolution CE113.R20);

Having noted the recommendation of the Executive Committee concerning the salary of the Director of the Pan American Sanitary Bureau (Resolution CE113.R20); and

Bearing in mind the provisions of Staff Rule 330.3,

## Resolves:

To establish the annual net salary of the Director of the Pan American Sanitary Bureau at US\$ 90,043 (dependency rate) and \$80,922 (single rate), effective 1 March 1994.

September 1994 OD 266, 142

# CSP24.R16 The XXIV Pan American Sanitary Conference,

Having considered the progress report presented by the Director (Document CSP24/14 and Add. I) on implementation of the Expanded Program on Immunization and the Plan of Action for the Eradication of Wild Poliovirus from the Americas;

Noting with great pride that transmission of wild poliovirus appears to have been interrupted in the Region of the Americas, inasmuch as no cases have been reported in the three years since the detection of a case in Junín, Peru, on 23 August 1991;

Further noting that national and multinational initiatives to eliminate measles are having a major impact on the incidence of this disease, that at the end of 1993 the Region of the Americas reported the lowest number of cases in its history, and that transmission may have been interrupted in several countries or areas (e.g., Chile, Cuba, and the English-speaking Caribbean countries);

Considering that efforts to eliminate neonatal tetanus have been very successful and that the Region has reached the goal set by the World Summit for Children of less than one case per 1,000 live births at the regional level;

Realizing that immunization coverage levels have continued to increase in most of the countries, reaching a regional level of 80% in the last two years for all the vaccines being administered (DPT, polio, measles, BCG, and TT):

Considering that strategies are being developed for controlling hepatitis B and rubella, and that the possibility of introducing new vaccines-for example, a vaccine against Haemophilus influenzae b-in national immunization programs is now being considered by several of the Member States:

Noting that these developments have contributed enormously to the overall strengthening of the health infrastructure in all countries; and

Recognizing that it will be a major challenge in the future to maintain and further increase immunization coverage in order to reach the goal of 95% by the year 2000, and that the introduction of new vaccines will have to be preceded by major shifts in health policies toward more preventive activities,

- 1. To congratulate all the Member States, their health authorities, their health workers, and the communities themselves on their continuing commitment and efforts toward attainment of the historic accomplishment represented by the eradication of poliomyelitis from the Western Hemisphere, as well as other major advances in their immunization programs.
- 2. To thank the agencies involved in this effort, particularly the United States Agency for International Development (USAID), the United Nations Children's Fund (UNICEF), the Inter-American Development Bank (IDB), Rotary International, and the Canadian Public Health Association (CPHA), as well as many other national organizations, for their support, without which it would have been impossible to achieve these goals, and to request that they maintain and

increase their contributions to the program in order to ensure that efforts to meet the new challenges are similarly successful.

- 3. To thank the Governments of Argentina, Belgium, Brazil, France, Italy, and Sweden for their support of national efforts to control and eliminate measles.
- 4. To establish the regional goal of elimination of measles by the year 2000 and urge the Member Governments to make every effort to achieve this goal as soon as possible.
- 5. To call on all the Member States to continue to give high priority to this program in order to ensure that the human and financial resources needed for implementing the actions outlined in the progress report, in particular funds for the purchase of vaccines, are made available in their national budgets and are allocated especially to those areas or populations at greatest risk for the target diseases. In this respect, it is of the utmost importance that:
- (a) National commissions for the certification of poliomyelitis eradication continue to monitor the poliomyelitis surveillance indicators in their own countries until the world is certified polio-free;
- (b) The acute flaccid paralysis surveillance system now in place be expanded to cover illnesses with fever and rash, including laboratory support, as part of the efforts to increase the possibility of eliminating measles;
- (c) Vaccination of women of childbearing age in areas identified to be at risk for tetanus be accelerated in order to ensure that every child is born to an immune mother and will not be at risk of contracting neonatal tetanus;
- (d) Support be provided for the efforts of the countries and institutions that are attempting to incorporate into their national vaccination program other vaccines, such as the hepatitis B, rubella, mumps, Haemophilus influenzae b, and meningococcal meningitis, ensuring that the greatest consideration is given to the epidemiologic relevance of this incorporation and that its financial implications are analyzed, so that the success obtained with other vaccines and with measures applied to improve vaccination coverage in the Region with respect to the EPI vaccines is not jeopardized;
- (e) In regard to the preceding subparagraph, the acquisition of additional funds from different sources be promoted to enable the countries of the Region to enjoy the benefits of the scientific advances worldwide in the field of prevention, without affecting the basic scheme;

- (f) Comprehensive care models for children be promoted to permit immunizations to be integrated as effectively as possible into growth and development activities, in order to decrease as much as possible the missed opportunities and promote systematic immunization in the network of services.
- 6. To request the Director to:
- (a) Continue monitoring the maintenance of poliomyelitis eradication in the Americas until the world is certified polio-free;
- (b) Search for additional resources to increase the funds assigned to the Measles Elimination Fund established by the XXXVII Meeting of the Directing Council1 in 1993, in order to ensure that the national initiatives under way in several of the countries will have the support needed in order to consolidate present gains toward the elimination of this disease;
- (c) Stimulate increased participation by the collaborating agencies through the work of national interagency coordinating committees and the monitoring of national plans of action.

September 1994 OD 266, 143

# CSP24.R17 The XXIV Pan American Sanitary Conference,

Having reviewed the report on acquired immunodeficiency syndrome (AIDS) in the Americas (Document CSP24/18 and Add. I);

Recalling Resolution WHA46.37 of May 19931 and its subsequent follow-up in May 1994,2 in which the World Health Assembly proposed and endorsed, respectively, the establishment of a joint, cosponsored United Nations Program on AIDS;

Considering that HIV transmission and the AIDS pandemic continue to grow globally as well as in the countries of the Region of the Americas, and that this situation requires a more intensive, long-term, effective, and sustainable intersectoral response;

Reaffirming that dealing with the intersectoral implications of AIDS is primarily a national responsibility in which all sectors must play their respective roles, with the appropriate leadership of the health sector; and

Recognizing the continued need for joint, coordinated efforts involving all relevant sectors of society, as well as multilateral and bilateral technical and financial cooperation agencies, in the prevention of HIV infection. AIDS, and other sexually transmitted diseases at the national, regional, and global levels,

- 1. To endorse the implementation of the new joint, cosponsored United Nations Program on AIDS in the Region of the Americas, taking advantage of the existing regional structures of the participating agencies and respecting the sovereignty of the countries.
- 2. To urge the Governments to adopt, jointly with international health agencies, common strategies and messages on HIV/AIDS prevention.
- 3. To express its conviction that the technical responsibility lies with the health agencies at the national, regional, and global levels.
- 4. To urge the Member States to support, establish, or reinforce mechanisms to ensure effective national coordination of all national, multilateral, and bilateral efforts to fight HIV infection, AIDS, and sexually transmitted diseases in the countries of the Americas.
- 5. To request the Director to:
- (a) Continue to support efforts to prevent and control HIV infection, AIDS, and sexually transmitted diseases in the Region of the Americas, and in particular, to prepare a proposal for a regional plan of action for the elimination of congenital syphilis to be presented to the Executive Committee at its 116th Meeting, for adoption by the Directing Council;
- (b) Continue to consult with the other agencies participating in the new joint, cosponsored United Nations Program on AIDS about a reasonable balance among the principal health problems of the Region, developing a mutually acceptable means of implementing that program in the Region of the Americas, including the establishment of a coordinating mechanism that will ensure the participation of other inter-American institutions and partners in the Region;

(c) Prepare a proposal to develop programs to promote healthy sexual practices.

September 1994 OD 266, 145

CSP24.R18 The XXIV Pan American Sanitary Conference,

Having seen the PAHO/ECLAC report presented in Document CSP24/20, "Health, Social Equity, and Changing Production Patterns in Latin America and the Caribbean";

Recognizing the mutually reinforcing relationship among health, health care, and the socioeconomic and political development of the American countries; and

Taking into consideration the resolution adopted on this subject by the XXV Session of the Economic Commission for Latin America and the Caribbean at Cartagena de Indias, Colombia, on 27 April 1994, which recommended to PAHO and ECLAC that this report be submitted to a Special Meeting of Ministers of Economy and Health to be held during the XXIV Pan American Sanitary Conference,

- 1. To urge the Member States to:
- (a) Disseminate this report and promote debate thereon among representatives of government agencies, parliaments, universities, and society in general with a view to strengthening national commitment to the attainment of equity in health and development;
- (b) Incorporate the basic elements of the PAHO/ECLAC proposal in agendas and policies on national development, so that health will be incorporated as both a focus and a condition for development with equity.
- 2. To encourage ongoing collaboration by the PAHO and ECLAC secretariats in the dissemination, refinement, and implementation of this proposal, particularly insofar as it refers to the monitoring, evaluation, and formulation of policy, and that efforts be made to extend this collaboration to other bilateral and multilateral organizations.
- 3. To ask the Director, within the limits of available resources, to support the implementation of this proposal by the Member States.

# CSP24.R19 The XXIV Pan American Sanitary Conference,

Having examined the document presented by the Director on the monitoring and evaluation of the strategies of health for all by the year 2000 (Document CSP24/21); and

Considering the commitments assumed by the WHO Member States at the Forty-fifth World Health Assembly (Resolution WHA45.4, 1992)1 on the presentation of monitoring reports,

## Resolves::

- 1. To approve the document presented by the Director and request him to submit it to WHO as the regional report on the third monitoring of progress in the application of the strategies of health for all by the year 2000 and primary health care.
- 2. To request WHO to conduct an exhaustive review of the instruments utilized in the monitoring and evaluation, and especially the process employed in the countries to implement the policies, plans, and programs consistent with the strategies of health for all and primary health care.
- 3. To urge the Member States of the Region to renew their commitment to the strategies of health for all by the year 2000 and primary health care, since they are the fundamental conceptual framework for improving the health situation in the countries and continue to be a proposal that is socially equitable, politically viable, technically feasible, and within the economic reach of the countries.

September 1994 OD 266, 147

Note:

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