



## PAN AMERICAN HEALTH ORGANIZATION

### EXECUTIVE COMMITTEE OF THE DIRECTING COUNCIL

16th MEETING OF THE SPECIAL SUBCOMMITTEE ON WOMEN, HEALTH, AND DEVELOPMENT

Washington, D.C., 27-29 March 1996

*Provisional Agenda Item 4*

MSD16/3 (Eng.)  
2 February 1996  
ORIGINAL: ENGLISH

#### REPORT ON THE ACTIVITIES OF THE PROGRAM ON WOMEN, HEALTH, AND DEVELOPMENT IN 1995 AND ACTIVITIES PROPOSED FOR 1996

In 1995, the Program on Woman, Health, and Development (HDW) had as its purpose to *facilitate the implementation of the strategic and programmatic orientations on women, health, and development of PAHO*, which, in turn, oriented the Program's technical cooperation to *focus attention on the importance of women's health, the interaction among women, health, and development, and the development of gender awareness at all levels* (SPO 1995-1998).

This report presents the objectives, expected results, and the respective levels of achievement for HDW for 1995. It highlights the salient achievements for the past year, and outlines directions to be pursued in 1996. In keeping with the request made by Member States at the 15th Meeting of the Subcommittee on Women, Health, and Development, information will be handed out at the 16th Meeting of the Subcommittee to provide a better appreciation of the extent of activities carried out in the countries.

## CONTENTS

	<i>Page</i>
Introduction . . . . .	3
HDW Program: Objectives and Expected Results for 1995 . . . . .	3
Expected Result 01 . . . . .	5
Expected Result 02 . . . . .	7
Expected Result 03 . . . . .	9
Expected Result 04 . . . . .	11
Expected Result 05 . . . . .	15
Final Observations and Perspectives for 1996 . . . . .	19
Acronyms . . . . .	21

## **Introduction**

The Program on Women, Health, and Development (HDW) is responsible for promoting and supporting national and regional programs that respond to the challenge of achieving gender equity in health and human development. This responsibility is expressed in its biennial target: *To assist in improving the health conditions of the population as a whole through the incorporation of a gender-based approach to policies and programs for health promotion and care.*

In 1995, the Program had as its purpose to *facilitate the implementation of the strategic and programmatic orientations on women, health, and development of PAHO*, which, in turn, oriented the Program's technical cooperation to focus attention on the importance of women's health, the interaction among women, health, and development, and the development of gender awareness at all levels (SPO 1995-1998).

This report presents the objectives, expected results, and the respective levels of achievement of HDW for 1995. It highlights the salient achievements of the past year, and outlines directions to be pursued in 1996. In keeping with the request made by Member States at the 15th Meeting of the Subcommittee on Women, Health, and Development, information will be handed out at the 16th Meeting of the Subcommittee to provide a better appreciation of the extent of activities carried out in the countries.

## **HDW Program: Objectives and Expected Results for 1995**

The HDW Program has four *objectives*:

- (a) To strengthen national capacity to formulate, implement, and evaluate health policies, programs, and projects in a manner that contributes to gender equity.
- (b) To support initiatives that contribute to the generation of scientifically sound information on (1) health conditions that are specific to women or that have differential impact on the two sexes; and (2) the role of men and women in health work.
- (c) To strengthen the collaboration, in a spirit of reciprocal learning, between organizations that advocate gender equity and the public health sector in Member States.
- (d) To strengthen the capacity of the Pan American Health Organization to effectively catalyze gender-sensitive health policies and programs in Member States.

The following *expected results* guided the work undertaken in 1995, in keeping with the above four objectives:

- 01 Technical staff at Headquarters and in the field are increasingly able to design, execute, monitor, and evaluate projects and programs from a gender perspective, and materials exist to assist them and ministries of health in the incorporation of a gender perspective in health.
- 02 Research and information dissemination initiatives in gender and health are conducted with particular emphasis on (a) strengthening national capacity to develop and execute research protocols, and (b) utilizing information to formulate gender-sensitive policies and programs.
- 03 Initiatives are developed at the local level that promote and strengthen the participation of women in monitoring, promoting, and protecting their health.
- 04 Interagency collaboration on women, health, and development is strengthened with organizations of the United Nations system, the inter-American system, multilateral and bilateral organizations, and nongovernmental organizations (NGOs) that work at the regional and country levels.
- 05 Program management and interprogrammatic coordination are strengthened so as to increase the capacity to deliver, monitor, and evaluate technical cooperation in women, health, and development.

In the following charts, each expected result is presented with its respective levels of achievement and indicators. After the presentation of each expected result, comments on any modifications to it are made, a summary of the most important achievements related to each is provided, and future directions are noted. The full titles related to acronyms used in the charts are provided in a list at the end of this document.

<b>Expected Result 01</b> Technical staff at Headquarters and in the field are increasingly able to design, execute, monitor, and evaluate projects and programs from a gender perspective, and materials exist to assist them and ministries of health in the incorporation of a gender perspective in health.	
Indicators	Level of Achievement
01 All HDW focal points in the field receive training as multipliers in conducting gender, health and development seminars. At least one-third of PWR offices have completed training.	<ul style="list-style-type: none"> <li>- HDW focal points based in each PWR participated in validation workshops for gender training, and suggestions for modifications in content and method were incorporated into draft manual.</li> <li>- A total of eight gender and health training seminars for PAHO staff in PWR offices have been conducted. These have included all PAHO technical staff at country level, including the PWRs, as well as representatives of ministries of health and other health sector professionals (nurses, NGOs) in the following countries: Belize, Bolivia, Colombia, Costa Rica, Cuba (2), Peru, and Venezuela.</li> <li>- HDW conducted gender and health training in the CPC Office for ministry of health focal points.</li> </ul>
02 At least two-thirds of PWRs commit funds to support gender training in their offices by December 1996.	<ul style="list-style-type: none"> <li>- PWRs and HDW agreed to co-finance gender training in 1996 in the following countries: Brazil, Chile, Ecuador, Paraguay, five Central American countries, and two CPC countries.</li> </ul>
03 Eighty percent of technical staff at Headquarters complete training.	<ul style="list-style-type: none"> <li>- In-house pilot session to test training content and method carried out with technical staff from other units. Suggested changes incorporated into draft manual.</li> </ul>
04 Gender, health, and development training materials are published and disseminated.	<ul style="list-style-type: none"> <li>- Content and method continuously perfected through seminars at country level.</li> <li>- Eight technical papers prepared by HDW to accompany manual as reference material.</li> <li>- CLM/OAS granted US\$ 15,000 to support cost of publication and dissemination of manual.</li> <li>- Final draft to be prepared for publication in March 1996.</li> </ul>
05 Draft monitoring plan exists for relevant PAHO projects.	<ul style="list-style-type: none"> <li>- In collaboration with DEC, mechanism being reviewed for monitoring incorporation of gender concerns in relevant project areas.</li> </ul>

#### ***Factors which were Modified in Achieving Expected Result 01***

The initiation of gender training in health for PAHO staff at Headquarters was postponed until the beginning of 1996. This decision was taken so as to give priority to field offices, with a view towards enriching the content of the modules presented through the inputs of technical staff operating at the local level. This modification proved to have been a sound one as HDW staff has, in this process, strengthened the approach and the content of the training.

The elaboration of a draft monitoring plan for reviewing the extent to which relevant PAHO projects incorporate a gender perspective is under way in collaboration with DEC. However, this process has been directly connected to PAHO's internal review of how extrabudgetary projects are monitored and executed in general, a review coordinated by DEC. Thus, any gender-monitoring plan elaborated will be closely tied to the results of this discussion.

#### ***For the Unit as a Whole: The Most Important Achievements Related to Expected Result 01 and Observations on Future Directions***

The achievements related to Expected Result 01 have placed the Program for Women, Health, and Development at the forefront of thinking about the relationship between women's health, women as producers of health, and human development. HDW's contribution to making operational concepts of sex, gender, health, and human development have been consistently praised by those who have participated in the training experience. This praise comes from other sister UN agencies, such as UNFPA and UNICEF, who have also participated in the training and are looking to ongoing cooperation from PAHO to assist their own respective personnel to approach their work in health from a gender perspective.

More importantly, as a result of the training several countries have taken up their own activities directed towards replicating the seminars. In Cuba, for example, as a result of HDW's facilitation of the training in May, a gender and health group was consolidated which subsequently conducted training in three municipalities. This group is planning to do the sessions for all nurses in all provinces. In Belize, as a result of the training, gender was incorporated into the five-year national health plan.

In 1996, it will be important to ensure that PAHO's technical staff at Headquarters participates fully in the gender and health training. Their participation is seen as critical to ensuring that all PAHO technical staff, not just at country level, are able to view health and human development through a gender lens.

**Expected Result 02**  
**Research and information dissemination initiatives in gender and health are conducted with particular emphasis on (a) strengthening national capacity to develop and execute research protocols and (b) utilizing information to formulate gender sensitive policies and programs.**

Indicators	Level of Achievement
01 Research guidelines and priorities in women, health, and development exist and are disseminated.	<ul style="list-style-type: none"> <li>- Background document to promote research in area of women's health and health from a gender perspective completed and distributed to other units of the Organization for review.</li> </ul>
02 At least two new research initiatives exist in an area relevant to women, gender, health and development and are promoted by HDW in collaboration with other technical units of the Organization.	<ul style="list-style-type: none"> <li>- Operational research project on quality of care from a gender perspective finalized, submitted to donors, and funded for up to US\$ 250,000 per annum for two countries and an expert seconded by Spanish Government to oversee project in one of these countries.</li> <li>- Ongoing discussions held with specialized branches of NIIH, with HPP and HDW, to explore mechanisms available to spearhead regional research in gender, tobacco, and health.</li> <li>- Approximately 60 research proposals submitted to HDR reviewed and technical support provided to 10 of these that are of particular relevance to HDW.</li> </ul>
03 Regional research workshop on gender and a health concern conducted.	<ul style="list-style-type: none"> <li>- Meeting of research advisory group on Gender and Communicable Diseases prepared for January 1996, in collaboration with HCP/HCT and HDP/HDR.</li> </ul>
04 Information data base increased by 15% of 3,500 current entries and updated information disseminated to countries.	<ul style="list-style-type: none"> <li>- SIMUS data base increased by approximately 500 new entries.</li> <li>- Two SIMUS publications, in English and Spanish, containing latest scientific releases on gender and health compiled and sent to PWR offices.</li> </ul>

**Expected Result 02 (cont.)**

Indicators	Level of Achievement
05 Documents prepared and disseminated which respond to HDW's commitments to the Subcommittee on Women, Health, and Development.	<ul style="list-style-type: none"> <li>- Approximately 150 persons from within and outside the Organization assisted in accessing information and references in areas related to women, health, and development.</li> <li>- Using available Internet resources, searching, sharing, and sending technical information was continuously functioning.</li> <li>- Four documents prepared by HDW for discussion at Subcommittee, and one document prepared by another unit.</li> <li>- Documents distributed on time to Subcommittee Members.</li> </ul>

***Factors which were Modified in Achieving Expected Result 02***

No modifications were made in achieving the expected result.

***For the Unit as a Whole: The Most Important Achievements Related to Expected Result 02 and Observations on Future Directions***

Overall, the salient achievements for 1995 within Expected Result 02 include:

- The ongoing expansion of the SIMUS data base and its use by persons inside and outside the Organization.
- The commitment by the Spanish Government to fund the research project on Quality of Care from a Gender Perspective, as well as to provide an expert for one year in Peru to develop and carry out this study.

Observations related to future directions include the need to review the terms of reference for the Subcommittee on Women, Health, and Development, in addition to possible expansion of the number of Member States that participate on that Subcommittee, in keeping with the growing importance of this area of technical cooperation to the Organization and its members.

**Expected Result 03**  
**Initiatives are developed at the local level that promote and strengthen the participation of women in monitoring, promoting, and protecting their health.**

Indicators	Level of Achievement
01 At least 90% of 1995 activities for subregional project in Central America completed.	<ul style="list-style-type: none"> <li>- Results of analysis of health situation which incorporate a gender perspective exist in the sites of project execution, and participating countries expressed interest in replicating these analyses in other country settings.</li> <li>- 100 % of funds programmed to achieve expected results were expended.</li> </ul>
02 At least 90% of 1995 activities for Andean project completed.	<ul style="list-style-type: none"> <li>- HDW visited each country of project execution to plan project activities beginning July 1995.</li> <li>- Two of three countries fully carried out project activities as planned.</li> </ul>
03 At least 90% of first-year activities for Indigenous Women's Health Project completed.	<ul style="list-style-type: none"> <li>- Technical collaboration between countries participating in project strengthened and three exchanges among these countries carried out in a span of four months.</li> <li>- 95 % of funds programmed to achieve expected results for 1994-1995 were expended.</li> </ul>
04 Project profile exists in one Member State.	<ul style="list-style-type: none"> <li>- Technical collaboration carried out between Guatemala and other countries with interest in initiating activities in health with indigenous women, in particular, Ecuador and Peru.</li> <li>- Belize, Guatemala, and Mexico requested technical cooperation of HDW to develop and execute UNFPA-funded project in women's integrated health care.</li> <li>- Technical cooperation provided to Colombia to assist with the development of a project profile for violence against women.</li> </ul>

**Expected Result 03 (cont.)**

Indicators	Level of Achievement
	<ul style="list-style-type: none"><li>- HDW spearheaded development of Women and AIDS project proposal, in collaboration with International Community of Women Living with HIV/AIDS, the Latin American AIDS Service Organizations, and the Latin American and Caribbean Women and AIDS Caucus. The project directs itself to selected countries and involves close work with women's grassroots organizations.</li></ul>

***Factors which were Modified in Achieving Expected Result 03***

The possibility of achieving Expected Result 03 is directly connected to the timely disbursement of the funds agreed to by the donor and PAHO. This possibility was severely compromised with respect to the Central American project, as NORAD did not disburse any of the committed funds in 1995. As a result, several activities were not carried out as intended in the 1995 APB. However, other activities not specifically included in the APB were executed, particularly with respect to country-based activities leading up to the Fourth World Conference on Women. These activities are detailed in the report to the donors on 1995 activities.

***For the Unit as a Whole: The Most Important Achievements Related to Expected Result 03 and Observations on Future Directions***

Project activities in the area of violence against women were initiated, and HDW provided direct technical collaboration to Andean and Central American countries in the development of their annual plans of action.

An annual meeting of Central American national consultants to the HDW Program and their counterparts in the ministries of health provided an excellent opportunity to discuss future strategies, in particular, the need to mobilize resources from other donors to expand the important contribution of the Scandinavian countries, and to work with other sectors in addition to ministries of health. Although there is complete agreement as to the importance of this strategy, implementing related activities appears to be difficult, due to lack of experience on the part of the focal points themselves in the area of human and financial resource mobilization. Attention needs to be focused on capacity building within the Program at the national level, and the focal point meeting planned for 1996 will provide an important opportunity for this to occur.

**Expected Result 04**  
**Interagency collaboration on women, health, and development strengthened with organizations of the United Nations system, the inter-American system, multilateral and bilateral organizations, and NGOs that work at the regional and country level.**

Indicators	Level of Achievement
01 At least four interagency efforts in the area of women, health, and development undertaken with agencies of the UN system.	<ul style="list-style-type: none"> <li>- HDW secured commitment from UNFPA to co-finance post that will oversee work with women's organizations.</li> <li>- UNFPA sponsored HDW's participation at UNFPA's Regional Meeting on Reproductive Health in Latin America and the Caribbean.</li> <li>- HDW provided financial and technical support to the Andean workshop, <i>The Police Force and Women's Human Rights</i>, carried out by UNIFEM.</li> <li>- HDW assisted UNIFEM in responding to its commitment to financially support the Latin American and Caribbean Network of Women Against Violence.</li> <li>- HDW facilitated and participated in a meeting organized by WHO in the Dominican Republic to review Women's Perspectives in Reproductive Health.</li> <li>- HDW participated in elaboration of WHO position paper presented at Fourth World Conference on Women.</li> <li>- HDW participated at the UN Fourth World Conference for Women as part of the WHO delegation.</li> </ul>
02 At least one collaborative effort undertaken with multilateral lending institutions.	<ul style="list-style-type: none"> <li>- HDW provides ongoing technical cooperation to IDB in process of conducting gender and health training for Bank staff.</li> <li>- HDW and IDB worked closely in elaboration of draft project document on violence against women, for consideration by IDB's project committee.</li> </ul>

**Expected Result 04 (cont.)**

Indicators	Level of Achievement
<p>03 At least one collaborative effort undertaken with agencies of the inter-American system.</p>	<ul style="list-style-type: none"> <li>- Joint collaborative effort initiated between IDB and PAHO through HDW, to design, plan, and execute regional mass media campaign to sensitize public about domestic violence.</li> <li>- HDW included staff development officer in charge of training for OAS in pilot gender training effort at PAHO Headquarters.</li> <li>- CIM contributed US\$ 15,000 to publication and dissemination of gender and health training manual.</li> <li>- HDW sent list of CIM delegates at country level to each HDW focal point, recommending that contact be made and collaboration with governmental agencies in charge of women's affairs be strengthened.</li> <li>- HDW participated in both yearly sessions of the Executive Committee of CIM and presented work of HDW.</li> </ul>
<p>04 At least one collaborative effort undertaken with a US based agency.</p>	<ul style="list-style-type: none"> <li>- Joint project elaborated with the Pacific Institute for Women's Health on <i>Economic Integration in Latin America and the Caribbean: Its Impact on Women's Health</i>.</li> <li>- Participated in planning and execution of INMED/PAHO Regional Conference on "Children and Youth: Promoting Health Futures." This included responsibility for organizing panel to discuss gender issues in reaching marginalized children, and presenting papers on that panel.</li> <li>- Active member of the working group on Reproductive Health and Family Planning of the Health and Development Policy Project and The Population Council.</li> <li>- Active member of USAID'S AIDS/CAP Women's Initiative Council to review AIDS/CAP policies and activities related to women and HIV/AIDS.</li> </ul>

**Expected Result 04 (cont.)**

Indicators	Level of Achievement
	<ul style="list-style-type: none"> <li>- Delivered plenary address to members of PALCO, a 50-year old entity comprising women associated with inter-American agencies.</li> <li>- HDW was guest lecturer at Johns Hopkins School of Advanced International Studies and the American University's School of International Studies.</li> <li>- At request of Partners of the Americas, submitted article for <i>Directions</i>, a publication of this hemispheric NGO, entitled "The Health of Women and Children: A Need for a Gender Lens."</li> <li>- Responded to USIA request to be interviewed on Worldnet's interactive television program which downlinks to countries in LAC. Topics included issues related to Women's Health and the Beijing Conference.</li> </ul>
05 At least two activities carried out with Latin American and Caribbean Women's Health Network, ISIS International or its network members.	<ul style="list-style-type: none"> <li>- Representative of LACWHN participated as observer at Subcommittee on Women, Health, and Development.</li> <li>- In collaboration with LACWHN, jointly identified women's organizations in the Region to participate in regional meeting entitled <i>Gender Perspective and Quality of Care in Reproductive Health Services</i>.</li> <li>- Finalized agreement with ISIS International to publish updates on PAHO's HDW efforts in Violence Against Women in its <i>Women's Health Journal</i>.</li> <li>- Paper published in ISIS <i>Women's Health Journal</i> on "Quality of Care from a Gender Perspective."</li> </ul>

*Factors which were Modified in Achieving Expected Result 04*

There were no modifications made in achieving expected result 04. However, indicator 04 also included activities with Canadian institutions, in particular, ongoing discussions with the International Development Research Center (IDRC) around the proposal on Quality of Care and Gender. In addition, HDW presented a paper on women's health issues in Latin America and the Caribbean at the Second Canadian Conference on International Health.

*For the Unit as a Whole: The Most Important Achievements Related to Expected Result 04 and Observations on Future Directions*

HDW has continued to expand and solidify its collaboration with other agencies of the UN system, the inter-American system, multilateral agencies, and NGOs. This collaboration has become increasingly systematic as HDW's capacity is strengthened as a unit and as it can respond to the continuous demands that such liaisons entail.

HDW's consistent search for collaborative opportunities and the level of achievement in this area are attested to by the degree to which the numerical indicators established in the 1995 APB were clearly surpassed. This pace is expected to continue, if not accelerate, in the coming year.

In this vein, HDW has continuously emphasized to its focal points working in PWR offices the priority which the Program assigns to the establishment of these interagency links, urging them, in turn, to do the same at the country level. In some cases this has been effective, but much more work needs to be done in this area, particularly as competition between, rather than cooperation, among agencies too often characterizes these relationships.

<b>Expected Result 05</b> Program management and interprogrammatic coordination are strengthened so as to increase capacity to deliver, monitor and evaluate technical cooperation in women, health, and development.	
Indicators	Level of Achievement
01 At least five new interprogrammatic collaboration activities initiated with other units of the Organization.	<ul style="list-style-type: none"> <li>- Carried out regional workshop on "Gender and Quality of Care in Reproductive Health Services" in collaboration with HPP/HPF, and prepared and presented plenary presentation on the conceptual framework to guide discussion.</li> <li>- Design of project proposal, "Quality of Care from a Gender Perspective," drafted by HDW and submitted for discussion with HSP, HPP, HCP/HCN, HDP/HDA, and HDP/HDR. Contributions from these programs incorporated into final version of proposal.</li> <li>- Ongoing coordination with HPP/HPF on initiatives related to reproductive health.</li> <li>- In collaboration with DEC, HDW provided technical assistance to NGOs in Ecuador who are systematizing and documenting their efforts to incorporate a gender perspective in quality of health care.</li> <li>- HDW supported participation in Panama of two staff persons from HDP/HDA to subregional meeting to incorporate gender into the analysis of local health situation in Central America.</li> <li>- HDW requested participation of HDP/HDR and HDP/HDD to work jointly on planning and executing proposal submitted to Eli Lilly on "The Impact of Economic Integration on Women's Health."</li> </ul>

**Expected Result 05 (cont.)**

Indicators	Level of Achievement
	<ul style="list-style-type: none"> <li>- HDW requested collaboration from HPP/HPN in panel organized by HDW at INMED/PAHO Conference, and HPP/HPN presented paper on Child Nutrition and Gender Factors.</li> <li>- HDW designed proposal on Women and AIDS, to be coordinated closely with HCP/HCA.</li> </ul>
02 Interprogrammatic coordination in at least half of PWRs include women, health, and development activities	<ul style="list-style-type: none"> <li>- HDW participated in two activities related to HSP/HSO: Chilean National Congress on Nursing, where HDW gave a plenary presentation, and the Pan American Congress on Nursing held in Havana, Cuba, in which HDW gave a plenary presentation and conducted an eight-hour pre-congress workshop on gender, health, and nursing, attended by 50 participants.</li> <li>- Participation on Subcommittee on Project Management coordinated by DEC.</li> <li>- Participation on PAHO's Publications Committee, the Staff Development Committee, and the Interprogrammatic Working Group for Consultation on Basic Indicators and Analysis of Health Situations.</li> </ul>
03 Project document for mobilizing funds to El Paso in Women, Health, and Development exists.	<ul style="list-style-type: none"> <li>- HDW collaborated with DBL by incorporating more than 300 Microisis records in PAHO's central bibliographic data base.</li> <li>- Twenty-one focal points for HDW in PWRs report having ongoing and increasing collaboration with other technical units of the Organization at the country level.</li> <li>- Draft plan discussed with HDW focal point in El Paso Office.</li> </ul>

**Expected Result 05 (cont.)**

Indicators	Level of Achievement
<p><b>04</b> Gender and health training with SERNAM and Ministry of Health executed.</p> <p><b>05</b> Trip reports.</p>	<ul style="list-style-type: none"> <li>- Plan of action for 1996 elaborated between SERNAM and HDW, as stipulated in SERNAM/PAHO agreement.</li> <li>- Training set for second quarter of 1996.</li> <li>- Direct technical collaboration provided to Belize, Bolivia (2), Chile (2), Colombia (2), Cuba (2), the Dominican Republic, Ecuador (2), Mexico (2), Peru, Venezuela, CPC (2), and the seven Central American countries encompassed in the SIMCA project, with special visits to Costa Rica (2) and Guatemala.</li> <li>- HDW has provided ongoing collaboration with CPC to prepare the document on <i>Health Conditions of Women in the Caribbean</i>; this collaboration has been provided through in-country visits as well as through Headquarters work.</li> <li>- Participated in the V Conference of Wives of Heads of State and Government of the Americas in Asuncion, Paraguay. Gave plenary address at this forum.</li> <li>- Participated in Second Canadian Conference on International Health on panel organized by IDRC. Presented a paper at this event.</li> </ul>

***Factors which were Modified in Achieving Expected Result 05***

No factors were modified in achieving expected result 05; however, one activity was only partially accomplished, i.e., elaboration of a project document that could be presented to donors so as to mobilize extra-budgetary funds in the El Paso Office. This remains to be done in the 1996 APB and will have to be discussed with the new PWR.

***For the Unit as a Whole: The Most Important Achievements Related to Expected Result 05 and Observations on Future Directions***

Interprogrammatic collaboration continues to be at the core of HDW's strategy to mainstream a gender perspective throughout the work of the Organization. This will, no doubt, be reinforced as staff at Headquarters participate in gender and health training programmed in the 1996 APB. Aside from the many new interprogrammatic activities undertaken in 1995, it is important to mention those that had begun in 1994 and were continued throughout 1995: collaboration with HPP in the area of gender, tobacco, and health; support from APL for conducting the gender and health training for PAHO staff; participating in the small grants review program for TDR; and ongoing participation in the task force related to the SAPIA initiative coordinated by HSP. A staff member of HDW continues to participate in the Organization's Internal Advisory Committee for Research and the Ethics Research Committee. HDW also participates as secretary to the Director's Advisory Committee on Women.

At the country level HDW focal points in PWR offices that have undergone the gender and health training this year report that as a result of the training experience there has been a surge of interest on the part of other programs to work with HDW interprogrammatically. This augurs well for HDW's ultimate goal to ensure that health programs and projects emanating from the Organization are gender sensitive.

## Final Observations and Perspectives for 1996

In 1995, the Program continued to undergo significant changes. In February, it was placed under the Health and Human Development Division (HDP), in keeping with the view that . . . *gender should be one of the categories of analysis in the planning and programming of activities in all sectors, and this focus should have repercussions for public health programs in all countries (SPO 1995-1998)*. In addition, a new post was created within the Program at a P3 level, increasing the Program's technical capacity to effectively monitor projects, particularly in light of the significant increase in extrabudgetary funding that the Program has experienced this year.

The activities undertaken throughout 1995 have furthered the achievement of the purpose of the Program as expressed in the lines of action in the SPOs, to . . . *focus attention on the importance of women's health, the interaction among women, health and development, and the development of gender awareness at all levels*.

The Program has directed its efforts towards three fronts:

- promoting activities that directly involve women in the planning and execution of initiatives designed to improve their health conditions and social position;
- making activities catalyzed by the Program known to the outside world;
- striving to increase in-house awareness of the importance of viewing health and human development through a gender lens.

In relation to the first, ongoing linkages with women's groups as individual organizations and as networks of organizations have become a cornerstone of the work of the Program. For example, representatives of these groups at the national and local levels are consulted on the design and subsequent execution of all extrabudgetary-funded projects. In those countries where extra-budgetary projects do not exist, the Program has continuously emphasized to the focal points the need to permanently consult with and provide information to the stakeholders themselves—women.

The Program's visibility vis-à-vis other agencies is attested to by the level of achievement for Expected Result 04 in comparison to 1994, as the relationship with other UN agencies and multilateral and bilateral organizations has exponentially increased. Close working relationships have been established in particular with CIM/OAS, IDB, UNFPA, and WHO.

It is important to emphasize as well the growing contact of the Program with organizations in Canada and the United States of America, both governmental and nongovernmental. Future work will be oriented towards solidifying the Program's capacity to function as a *women and health bridge between North and South*.

It is difficult to assess the impact of the Beijing Conference on the Program's rapidly growing contacts with other agencies. What is clearer is the impact of the Program's participation at Beijing on the visibility of the Program in-house. The report from Beijing presented to PAHO staff by the Program was well attended, in contrast to what has been the norm for attendance a *women's events*, such as the Subcommittee.

There is no doubt that within the Organization there are still a few who question the need for a women's program, particularly because, as is so often heard, men die younger. Nevertheless, it is also evident that as the Program has been able to launch and carry out a technically sound gender and health training program, many misconceptions about gender, health, and human development are being clarified. More importantly, and particularly in the PWR offices where the training has been conducted, PAHO staff, both men and women, have been overwhelmingly positive about the contribution a gender perspective can make to an understanding of the health/illness process, as well as to health maintenance and care.

Challenges that remain are many. There is the imperative need to assist countries in following up on agreements made by them in relation to women's health at the UN World Conferences in Cairo, Copenhagen, and Beijing. Much of this entails strengthening the countries' capacity to generate and disseminate knowledge with respect to the specificities regarding women's health and women's participation in the health production process. It also requires that the information produced be used to set national priorities and to design interventions, research, and advocacy efforts.

Finally, it is worth mentioning that one of the results of the elaboration of the gender and health training modules by the Program itself has been the professional and personal growth undergone by each member of HDW's staff during 1995. The very exercise of putting together a technically solid and methodologically attractive program for PAHO colleagues and ministry counterparts has been a source of individual professional strength and group cohesion. In addition, the ability to successfully address the personal challenges and fears that arise from facing one's colleagues and attempting to impart concepts questioned by others has perhaps been the greatest reward the Program has experienced this year.

## ACRONYMS

AIDS	acquired immunodeficiency syndrome
AIDSCAP	AIDS Control and Prevention Project (Family Health International)
CIM	Inter-American Commission of Women (Organization of American States)
CPC	Caribbean Program Coordination
DBL	Headquarters Library
DBC	Office of External Relations
HCA	Program on Acquired Immunodeficiency Syndrome and Sexually Transmitted Diseases
HCN	Program on Noncommunicable Diseases
HCP	Division of Disease Prevention and Control
HCT	Program on Communicable Diseases
HDA	Program on Health Situation Analysis
HDD	Program on Public Policy and Health
HDP	Division of Health and Human Development
HDR	Program on Research Coordination
HDW	Program on Women, Health, and Development
HIV	human immunodeficiency virus
HPF	Program on Family Health and Population
HPN	Program on Food and Nutrition
HPP	Division of Health Promotion and Protection
HSO	Program on Organization and Management of Health Systems Based on Primary Care
HSP	Division of Health Systems and Services Development
IDB	Inter-American Development Bank
IDRC	International Development Research Center (Canada)
INMED	International Medical Services for Health
ISIS	Women's Information and Communication Service
LAC	Latin America and the Caribbean
LACWHN	Latin American and Caribbean Women's Health Network
NGO	nongovernmental organization
NIH	National Institutes of Health (United States of America)
NORAD	Norwegian Agency for International Development

OAS	Organization of American States
PAHO	Pan American Health Organization
PALCO	Pan American Liaison Committee of Women's Organizations
PWR	PAHO/WHO Representative (or Office)
SAPIA	Health of Indigenous Peoples of the Americas
SERNAM	Servicio Nacional de la Mujer
SIMCA	Salud Integral de la Mujer en Centroamerica
SIMUS	Regional Information System on Women, Health, and Development
SPO	strategic and programmatic orientations
TDR	Tropical Disease Research
UN	United Nations
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
USAID	United States Agency for International Development
WHO	World Health Organization