



PAN AMERICAN HEALTH ORGANIZATION  
WORLD HEALTH ORGANIZATION



## 25th PAN AMERICAN SANITARY CONFERENCE

*Washington, D.C., USA, 21 - 25 September 1998*

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### XXV Pan American Sanitary Conference

#### RESOLUTIONS

**CSP25.R1** The 25th Pan American Sanitary Conference,

Considering it advisable that the Rules of Procedure of the PAHO Governing Bodies be brought in line with current practice and that similar rules for each body be consistent;

Aware that the proposed amendments to the Rules of Procedure of the Directing Council and the Pan American Sanitary Conference were thoroughly reviewed by the Executive Committee and the Working Party it established for this purpose;

Considering that the Executive Committee, by Resolution CE120.R17, and the Directing Council, by Resolution CD40.R17, adopted the modifications to their Rules of Procedure, and recommended that the Pan American Sanitary Conference adopt its amended Rules; and

Bearing in mind the provisions of Rule 65 of the present Rules of Procedure of the Conference,

#### **RESOLVES:**

1. To thank the Working Party of the Executive Committee for its comprehensive review of the Rules of Procedure of the three Governing Bodies of the Pan American Health Organization.

To adopt the amended Rules of Procedure of the Pan American Sanitary

Conference as they appear in the Annex to Document CSP25/3.

*(Adopted at the first meeting, 21 September 1998)*

**CSP25.R2** The 25<sup>th</sup> Pan American Sanitary Conference,

Having considered the report of the Director on the collection of quota

contributions (Document CSP25/19 and Add. 1) and the concern expressed by the 122<sup>nd</sup> Session of the Executive Committee with respect to the status of the collection of quota contributions;

Noting that Cuba is in compliance with its deferred payment plan; and

Further noting that the Dominican Republic and Grenada have made "good faith" efforts to pay their 1995 arrearages,

***RESOLVES:***

To take note of the report of the Director on the collection of quota

Contributions (Document CSP25/19 and Add. 1).

2. To express appreciation to those Member States that have already made payments in 1998, and to urge all Member States in arrears to meet their financial obligations to the Organization in an expeditious manner.

3. To congratulate the Member States which have fully met their quota obligations through 1998.

To compliment the Member States which have made payment efforts to reduce quota arrears for prior years.

5. To request the Director to notify Cuba, the Dominican Republic, and Grenada that their voting privileges have been restored at this 25<sup>th</sup> Pan American Sanitary Conference.

To request the Director:

- (a) To continue to monitor the implementation of special payment agreements made by Member States in arrears in the payment of prior years' quota assessments;
- (b) To advise the Executive Committee of Member States' compliance with their quota payment commitments;
- (c) To report to the 41st Directing Council on the status of the collection of quota contributions for 1999 and prior years.

*(Adopted at the second meeting, 21 September 1998)*

**CSP25.R3** The 25<sup>th</sup> Pan American Sanitary Conference,

Having considered Document CSP25/7 and the tentative request to the World Health Organization for US\$ 77,725,000 without cost increases for the Region of the Americas for 2000–2001; and

Noting the recommendation of the 122nd Session of the Executive Committee,

***RESOLVES:***

To request the Director to transmit to the Director-General of WHO the request for US\$ 77,725,000 without cost increases for the Region of the Americas for 2000–2001, for consideration by the WHO Executive Board and the World Health Assembly in 1999.

*(Adopted at the second meeting, 21 September 1998)*

**CSP25.R4** The 25<sup>th</sup> Pan American Sanitary Conference,

Having seen Document CSP25/8, "Strategic and Programmatic Orientations for the Pan American Sanitary Bureau, 1999–2002";

Mindful of the constitutional function of the Pan American Sanitary Conference in determining the general policies of the Organization; and

Recognizing the need of the Member States and the Secretariat to channel their efforts and resources toward tasks that improve access to health services and help to ensure effective satisfaction of the health needs of the inhabitants of the Region,

***RESOLVES:***

1. To approve the "Strategic and Programmatic Orientations for the Pan American Sanitary Bureau, 1999–2002" as a basic frame of reference for the strategic planning of the technical cooperation of the Secretariat.

2. To urge the Member States, when formulating their national health policies, to take into account the strategic and programmatic orientations for the Bureau corresponding to the quadrennium 1999–2002.

3. To request the Director to:

(a) apply the strategic and programmatic orientations when preparing the biennial program budgets of the Organization during the quadrennium 1999–2002;

(b) assess the impact of technical cooperation with the Member States, utilizing the "Strategic and Programmatic Orientations for the Pan American Sanitary Bureau, 1999–2002" as the basic frame of reference, and report the findings of this assessment to the Governing Bodies;

(c) disseminate the document "Strategic and Programmatic Orientations for the Pan American Sanitary Bureau, 1999–2002" among the Member States, and transmit it to the Director General of WHO for consideration;

(d) transmit the aforementioned document to multilateral organizations and the technical cooperation agencies of donor countries that participate in health sector activities of the Member States.

*(Adopted at the third meeting, 22 September 1998)*

**CSP25.R5** The 25<sup>th</sup> Pan American Sanitary Conference,

Taking note of the grave impact of El Niño 1997–1998 on the health and

economy of the entire Region of the Americas;

Having seen Document CSP25/10 on El Niño and its impact on health, presented by the Director;

Concerned about the vulnerability of the health sector to events resulting from this phenomenon;

Recognizing the importance of the measures adopted by several countries to strengthen their systems for epidemiological surveillance, basic sanitation, and communicable disease control;

Convinced that the damage to the infrastructure of the sector, including health facilities, water and sanitation systems, and other vital services, can be minimized for future catastrophic events and that greater efforts should therefore be made by the Member States in this regard;

Recalling

Resolutions CD24.R10 (1976), CD26.R36 (1979), CD27.R40 (1980), CD32.R10 (1987) and CD40.R13 (1997) of the Directing Council, mandating that PAHO provide technical cooperation on disaster preparedness in matters related to health and, specifically, that it continue this cooperation designed to prepare the sector to deal with the disasters caused by El Niño; and

Taking into account Resolution AG/RES.1584, "Special Program of Support to Countries affected by El Niño," adopted by the XXVIII regular session of the General Assembly of the Organization of American States, urging the member states and the organs and agencies of the inter-American system (in particular the Inter-American Development Bank, the Inter-American Institute for Cooperation in Agriculture, and the Pan American Health Organization), as well as the nongovernmental organizations that are pursuing similar aims, to intensify, within the framework of the International Decade for Natural Disaster Reduction, their cooperation with efforts aimed at preventing, reducing, and repairing the effects of El Niño,

***RESOLVES:***

1. To invite the Member States to review and update their emergency health

plans, using as a foundation the lessons learned from the disasters caused by El Niño 1997-1998.

To urge the Member States that had developed disaster preparedness

and mitigation programs prior to the disasters caused by El Niño to strengthen these programs, maintaining a comprehensive vision that encompasses all types of risks.

3. To request the Member States that still have not done so to:

(a) develop disaster mitigation programs that, in keeping with the recommendations of the International Conference on Disaster Mitigation in Health Facilities held in Mexico in 1996, include aspects of design and structural and nonstructural reinforcement and maintenance of health facilities, water and sanitation systems, and other vital services;

strengthen their programs for preparedness in any emergency, placing multidisciplinary emphasis on epidemiological surveillance, disease control, environmental quality, environmental sanitation, and vector control, as well as on disaster preparedness in hospitals and communities;

(c) support data collection and medium- and long-term research projects in order to determine with greater certainty the impact of El Niño on human health.

To request the Director to:

(a) strengthen technical cooperation with the Member States for the development of policies and programs geared toward upgrading the sanitary structure for the prevention and mitigation of damages caused by disasters;

(b) promote regional and country efforts to ensure the creation of an institutional memory with respect to El Niño 1997-1998, as well as epidemiological surveillance and research studies that lead to a better understanding of the impact of this phenomenon.

*(Adopted at the fourth meeting, 22 September 1998)*

**CSP25.R6** The 25<sup>th</sup> Pan American Sanitary Conference,

Considering that population aging will have a major impact on health care, on the kinds of institutions and informal arrangements that will be needed to support family care-giving, and on the distribution of resources along the life span;

Aware that the greatest challenge of the millennium will be to keep aging populations active and free of disabling diseases for as long as possible and that active and healthy aging depends to a large extent on a health promotion perspective; and

Recognizing that 1999, International Year of Older Persons, is an important opportunity for PAHO/WHO to strengthen its leadership role in aging and health issues,

***RESOLVES:***

To request Member States to:

(a) endorse the new conceptual framework for healthy aging developed within the contexts of WHO's Global Program on Aging and Health, international conferences, and PAHO's health promotion and family health and population framework;

(b) implement national and regional plans of action on health and aging;

(c) consider the need to address the following key concepts in the development of national plans, policies, and programs for aging and health:

– recognition that the health of older adults has a significant impact on a number of dimensions in the development and the functioning of societies, requiring an intersectoral approach guided by policy and legislative instruments, informed by research, and supported by competent human resources and health services sensitive to the needs of older persons;

– strengthening of the capacity of the primary health care sector to provide a continuum of services along the life cycle;

– strengthening of the capacity of older persons as a resource for the development of healthy environments, provision of infrastructures to support family caregivers, development of community alternatives to institutionalization, and promotion of

intergenerational programs.

2. To request the Director to:

(a) encourage the development and testing of instruments and methodologies which facilitate the countries' implementation of an integral approach to the health of older persons;

(b) continue efforts to mobilize resources which will:

- support population research on the health and well-being of elders;
- strengthen the capacity of a regional public policy network;
- provide geriatric education and training of the primary health care professional;
- develop social communication and mass media education for promoting a new conceptual framework for aging societies.

*(Adopted at the fourth meeting, 22 September 1998)*

**CSP25.R7** The 25<sup>th</sup> Pan American Sanitary Conference,

Bearing in mind the provisions of Articles 4.D and 15.A of the Constitution of the Pan American Health Organization; and

Considering that Cuba, Nicaragua, and the United States of America were elected to serve on the Executive Committee upon the expiration of the periods of office of Bahamas, Chile, and Costa Rica,

***RESOLVES:***

1. To declare Cuba, Nicaragua, and the United States of America elected to membership of the Executive Committee for a period of three years.

To thank Bahamas, Chile, and Costa Rica for the services rendered to the Organization during the past three years by their delegates on the Executive Committee.

*(Adopted at the fifth meeting, 23 September 1998)*



**CSP25.R8** The 25<sup>th</sup> 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 1999.
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.

*(Adopted at the fifth meeting, 23 September 1998)*

**CSP25.R9** The 25<sup>th</sup> Pan American Sanitary Conference,

Noting the damage and human suffering caused by Hurricane Georges as it moves through the Caribbean, and especially the damage to the health services infrastructure,

***RESOLVES:***

1. To express its condolences and solidarity with the peoples and governments of the countries and territories affected by Hurricane Georges.
2. To request the international community to respond generously to the health needs identified by the authorities of the affected countries and to continue to

support the efforts of the countries to reduce the negative impact of these climatic phenomena.

3. To urge all Member States to continue to strengthen preparedness in the health sector and increase their efforts to reduce the vulnerability of their facilities to natural disasters through structural and nonstructural mitigation measures.

4. To request the Director of PAHO, as resources permit, to collaborate with the affected countries in assessing the damage to the health sector, identifying needs, and mobilizing resources for rehabilitation and reconstruction.

*(Adopted at the sixth meeting, 23 September 1998)*

**CSP25.R10** The 25<sup>th</sup> Pan American Sanitary Conference,

Having reviewed the report on acquired immunodeficiency syndrome (AIDS) in the Americas (Document CSP25/13, and Add. 1);

Considering that the epidemic of HIV/AIDS is still concentrated in high-risk and vulnerable populations and that this situation provides a window of opportunity to avert the spread of the epidemic to the general population in most countries of the Americas;

Taking into account the experience and achievements of Member States in establishing and developing national AIDS programs, strengthening surveillance, ensuring the safety of the blood supply, and targeting behavioral interventions to the most vulnerable groups; and

Mindful of the fact that sexually transmitted diseases remain important co-factors in the sexual transmission of HIV, as well as of the need to prevent the perinatal transmission of HIV and other pathogens and to improve the quality, efficiency, and effectiveness of HIV/AIDS/STD care,

***RESOLVES:***

1. To urge Member States to:

(a) redouble their efforts to fight HIV/AIDS within the multisectoral approach promoted by the Joint United Nations Program on HIV/AIDS (UNAIDS);

(b) endorse and support the adoption of a Region-wide strategy for sexually transmitted disease prevention and control (STD.PAC), based on the WHO guidelines;

(c) establish national priorities to improve HIV/AIDS/STD prevention and care, including counseling and testing, treatment and prophylaxis of tuberculosis and other opportunistic infections, early detection and treatment of curable STDs, prevention of mother-to-child transmission of HIV, development of culturally appropriate models of HIV/AIDS care, and improved access to antiretroviral drugs for all those in need;

(d) increase national efforts against HIV/AIDS and sexually transmitted diseases and promote the establishment of technical information and financial cooperation networks between countries.

2. To request the Director to:

(a) develop mechanisms to strengthen the regional capacity for prevention and control of sexually transmitted diseases and to adapt WHO's strategy for STD prevention and control (STD.PAC) to the Americas;

(b) continue to explore strategies to improve patient HIV/AIDS care, including access to AZT and other antiretroviral drugs for the prevention of mother-to-child transmission of HIV, and the treatment of HIV infection and AIDS;

explore mechanisms to assist Member States in addressing ethical issues related to HIV vaccine trials and access to treatment.

*(Adopted at the sixth meeting, 23 September 1998)*

**CSP25.R11** The 25<sup>th</sup> Pan American Sanitary Conference,

Having considered the progress report of the Director on vaccines and immunization (Document CSP25/14);

Noting with satisfaction the progress being achieved in the control/eradication of some of the vaccine-preventable diseases, e.g. measles eradication by the year 2000, control of neonatal tetanus, and maintenance of polio free status;

Recognizing that several countries have already introduced or are considering the introduction of additional vaccines, e.g., measles-mumps-rubella (MMR) and *Haemophilus influenzae* type B (Hib) into their national immunization programs; and

Observing with preoccupation that surveillance for acute flaccid paralysis (AFP) has deteriorated in several countries, the number of individuals susceptible to measles has accumulated to dangerous levels in a few countries, and outbreaks of yellow fever have been observed in areas of the endemic countries,

***RESOLVES:***

To urge Member States to:

(a) strengthen their acute flaccid paralysis surveillance system to ensure that the Region remains polio free;

(b) emphasize the critical need of implementation of follow up measles campaigns in those countries that have accumulated a considerable number of children susceptible to measles;

(c) introduce vaccines against rubella and *Haemophilus influenzae* type B into their national vaccination schedule, and against yellow fever in all the areas endemic for this disease;

(d) recognize the importance of guaranteeing the financing of their national immunization programs with funds from their national budgets;

utilize vaccination coverage and epidemiological surveillance indicators for vaccine-preventable diseases at the local level (municipality, district, etc.), as indicators to measure the impact of the decentralization of the health services.

***(Adopted at the seventh meeting, 24 September 1998)***

***CSP25.R12*** The 25<sup>th</sup> Pan American Sanitary Conference,

Having seen the report of the Director on the prevention and control of tobacco use (Document CSP25/11) and Resolution CD34.R12 (1989);

Recognizing the seriousness of the epidemic of tobacco use and dependency as a priority health problem in the Region, especially among children and adolescents; and

Mindful of the need for immediate adoption of effective measures aimed at the prevention and control of this epidemic,

***RESOLVES:***

1. To adopt the recommendations presented in Document CSP25/11.
2. To request Member States to:
  - (a) take urgent steps to protect children and adolescents through the regulation of advertising, to enforce the laws and ordinances aimed at eliminating the sale of tobacco products to minors, and to establish effective prevention programs;
  - (b) officially designate a staff member or unit to be in charge of intra and interministerial coordination of the national programs for the prevention and control of smoking;
  - (c) prepare and implement a plan of action, with educational, legislative, regulatory, and fiscal components, for the prevention and control of tobacco use.

To recommend that the Director step up the efforts of the Organization to mobilize the budgetary and extrabudgetary resources needed to support and strengthen the regional programs to control smoking.

***(Adopted at the eighth meeting, 24 September 1998)***

Reaffirming and updating the concepts and mandates contained in Resolutions CD30.R8, CD31.R18, CD32.R9, CD33.R13, CD35.R19, CSP23.R17, CD36.R18 and CD37.R18, and the discussion at the 116th Session of the Executive Committee in 1995 on the subjects of population, family planning, maternal and child health, prevention and reduction of maternal mortality, comprehensive health of adolescents, and population and reproductive health; and

Noting with satisfaction that concerted efforts in the past have been influential in improving reproductive health and that significant progress has been made, and observing that some major challenges remain to achieving reproductive health for all, especially the righting of inequities,

***RESOLVES:***

1. To urge Member States to:

(a) reaffirm commitments to implement plans of action developed within the context of international conferences and the PAHO Governing Bodies for action in the area of reproductive health, in the spirit of respect for the values and culture of each person, family, community, and nation;

(b) recognize the critical importance of reproductive health services, which demand an intersectoral approach, a basic policy and legal structure, good management, organizational support, and competent human resources;

(c) assure a quality approach in defining reproductive health strategies and plans for priority populations with attention to special needs of indigenous groups;

(d) develop reliable information systems for decision-making and effective strategy design, including the development of process and impact indicators to be utilized in ongoing monitoring and evaluation;

(e) stimulate research on the cost-effectiveness of specific interventions and technology, motivation for attitudinal and behavioral change in reproductive health, the social costs of maternal morbidity and mortality, and utilization of communication methodologies to disseminate information in different sectors of the population;

(f) ensure, in the context of health sector reform, an adequate financial base for reproductive health activities.

2. To request the Director to:

(a) continue to support technical cooperation with the countries in reproductive health and population;

(b) encourage the development and testing of instruments and methodologies that facilitate the countries' implementation of an integral focus for reproductive health activities and encourage broad multidisciplinary/multisectoral and population-based consultation in the definition of priorities;

(c) intensify interagency cooperation and coordination in order to maximize the impact of activities;

continue efforts to mobilize resources, which will permit, in an environment of respect for the rights, values, and culture of all persons involved, the development of reproductive health activities in the countries of the Region.

*(Adopted at the eighth meeting, 24 September 1998)*

**CSP25.R14** The 25<sup>th</sup> Pan American Sanitary Conference,

Considering the revision made to the base/floor salary scale for the professional and higher-graded categories of staff, effective 1 March 1998;

Taking into account the decision by the Executive Committee at its 122<sup>nd</sup> Session to adjust the salaries of the Deputy Director and Assistant Director (Resolution CE122.R8);

Having noted the recommendation of the Executive Committee concerning the salary of the Director of the Pan American Sanitary Bureau (Resolution CE122.R8); 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\$ 102,130 (dependency rate) and \$91,883 (single rate), effective 1 March 1998.

*(Adopted at the ninth meeting, 25 September 1998)*

**CSP25.R15** The 25<sup>th</sup> Pan American Sanitary Conference,

Having seen the report of the Director on the prevention and control of tobacco use (Document CSP25/11) and Resolution CSP25.R12; and

Mindful of the concerns expressed by the Member States about the impact at all levels of the cultivation of tobacco and the manufacture and marketing of tobacco products,

***RESOLVES:***

To request the Director to:

- (a) begin a study of the feasibility of preparing a regional convention against tobacco use;
- (b) submit a progress report to the Governing Bodies in 1999.

*(Adopted at the ninth meeting, 25 September 1998)*

**Note:**

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