CONTENTS

Participants.........................................................................................................................5
Opening of the Council......................................................................................................6
Officers................................................................................................................................6
Committee on Credentials.................................................................................................6
General Committee............................................................................................................7
Working Parties..................................................................................................................7
Other Matters.....................................................................................................................7
Meetings..............................................................................................................................9

Resolutions and Decisions ................................................................................................9

Resolutions
CD47.R1: Disability: Prevention and Rehabilitation in the Context of the Right to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health and Other Related Rights .................................................9
CD47.R2: Report on the Collection of Quota Contributions ..............................................................12
CD47.R3: Health Agenda for the Americas 2008-2017 .................................................................14
CD47.R4: Process for the Election of the Director of the Pan American Sanitary Bureau .................................................................................................................14
CD47.R5: Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Argentina, Barbados, and Costa Rica ........................................................................................................................................20
CD47.R7: Public Health, Health Research, Production and Access to Essential Medicines .........................................................................................................................23
CD47.R9: Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, Including Diet and Physical Activity .............................................................................................................26
CONTENTS (cont.)

Resolutions (cont.)
CD47.R10: Regional Strategy for Sustaining National Immunization Programs in the Americas ................................................................. 28
CD47.R11: Methodology for the Formulation of the Strategic Plan for the Pan American Sanitary Bureau, 2008-2012 ........................................ 30
CD47.R12: Proposed 10-Year Regional Plan on Oral Health for the Americas .... 30
CD47.R13: Amendments to the Financial Regulations ........................................ 31
CD47.R14: Process for the Appointment of the External Auditor ......................... 32
CD47.R15: Salary of the Director of the Pan American Sanitary Bureau ............... 33
CD47.R16: Amendment to the Staff Regulations of the Pan American Sanitary Bureau ............................................................................. 33
CD47.R17: Process for Implementing the New Scale of Quota Assessments Based on the New OAS Scale .............................................. 34
CD47.R18: Health of the Indigenous Peoples in the Americas ............................ 34
CD47.R20: Health Promotion: Achievements and Aspirations Contained in the Ottawa and Bangkok Charters .............................................. 37

Decisions
CD47(D1): Committee on Credentials ....................................................... 39
CD47(D2): Officers ..................................................................................... 39
CD47(D4): General Committee ................................................................. 39
CD47(D5): Agenda ..................................................................................... 39
CD47(D6): Annual Report of the President of the Executive Committee ............ 40
CD47(D7): Annual Report of the Director of the Pan American Sanitary Bureau ... 40
CD47(D9): Policy and Coordination Committee of the UNDP/World Bank/WHO Special Program of Research, Development, and Research Training in Human Reproduction ..................................................... 40
CONTENTS (cont.)

Decisions (cont.)
CD47(10): Joint Coordinating Board of the UNICEF/UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR)

Annexes
Annex A: Agenda
Annex B: List of Documents
Annex C: List of Participants
1. The 47th Directing Council of the Pan American Health Organization, 58th Session of the Regional Committee of the World Health Organization for the Americas, was held in Washington, D.C., from 25 to 29 September 2006, as convened by the Director of the Pan American Sanitary Bureau.

Participants

2. The following Member and Participating States and Associate Members of the Pan American Health Organization were represented: Antigua and Barbuda, Argentina, Bahamas, Barbados, Belize, Bolivia, Brazil, Canada, Chile, Colombia, Costa Rica, Dominican Republic, Ecuador, El Salvador, France, Grenada, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Netherlands, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, United Kingdom, United States of America, Uruguay, and Venezuela.

3. The Government of Spain was represented as an Observer State. The Governments of China, Iceland, and Japan were represented as Observer States to the Regional Committee. The Executive Committee was represented by Dr. Ginés González García, Minister of Health and Environment, (Argentina), President, and Dr. Rossana García González, Director General of Health (Costa Rica), Vice President. The WHO Executive Board was represented by Dr. Fernando Antezana Aranibar, Senior Advisor, Ministry of Health and Sports (Bolivia), Chairman.

4. The Council was also attended by Dr. Anders Nordström, Acting Director-General of the World Health Organization. The following intergovernmental agencies were represented: Caribbean Community, Caribbean Environmental Health Institute, Economic Commission for Latin America and the Caribbean, Hipólito Unanue Agreement, Inter-American Development Bank, Inter-American Institute for Cooperation on Agriculture,—Organization of American States, The Global Fund to Fight AIDS, Tuberculosis, and Malaria, The World Bank, United Nations Office for the Coordination of Humanitarian Affairs, and United Nations Environment Program. Representatives of 20 nongovernmental organizations attended.

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1 This Final Report is in the nature of a summary and should thus be read in conjunction with the Proceedings of the Session, where the topics are explored in greater detail.
Opening of the Council

5. The Council was opened by the outgoing President (Uruguay), represented by Dr. María Julia Muñoz. Speakers at the opening ceremony were Dr. Mirta Roses Periago, Director, Pan American Sanitary Bureau; Dr. Anders Nordström, Acting Director-General, World Health Organization; Hon. Michael Leavitt, Secretary, Health and Human Services, United States of America; Amb. Andrew von Eschenbach, Acting Commissioner, Food and Drug Administration, United States of America; and Dr. José Miguel Insulza, Secretary-General, Organization of the American States.

Officers

6. Pursuant to Rule 20 of the Rules of Procedure, the Head of Delegation of Uruguay, which occupied the Presidency of the 46th Directing Council, presided until the elections for office of the 47th Council. As a result of the elections, the following delegates served as officers:

- **President:** Guyana Hon. Dr. Leslie Ramsammy
- **Vice Presidents:** Ecuador Dr. Guillermo Wagner Cevallos Haiti Dr. Robert Auguste
- **Rapporteur:** Panama Dr. Camillo Alleyne
- **Secretary ex officio:** Director, Pan American Sanitary Bureau Dr. Mirta Roses Periago

7. During the sixth, seventh, and eighth meetings, Dr. Guillermo Wagner Cevallos (Ecuador) substituted for Dr. Leslie Ramsammy as President, and during the ninth meeting, Dr. Robert Auguste (Haiti) did so as well.

Committee on Credentials

8. The Committee on Credentials was appointed pursuant to Rule 31 of the Rules of Procedure and was constituted as follows:

- **President:** Uruguay Dr. María Julia Muñoz
- **Members:** Nicaragua Ms. Margarita Gurdíán López Suriname Hon. Dr. Celsius Waterburg
9. The Committee on Credentials met two times and submitted its reports at the first and sixth meetings.

**General Committee**

10. With the election of Honduras, Puerto Rico, and the United States of America to the General Committee, pursuant to Rule 32 of the Rules of Procedure, the Committee was constituted as follows:

- **President of the Council:** Guyana Hon. Dr. Leslie Ramsammy
- **Vice Presidents of the Council:**
  - Ecuador Dr. Guillermo Wagner Cevallos
  - Haiti Dr. Roberto Auguste
- **Rapporteur of the Council:** Panama Dr. Camillo Alleyne
- **Members:**
  - Honduras Dr. Aníbal Funez
  - Puerto Rico Dr. Rosa Pérez Perdomo
  - United States of America Ms. Ann Blackwood

11. The General Committee met once and submitted its report at the second meeting of the Council.

**Working Parties**

12. At the first meeting, a working party, consisting of the Delegates of the Bahamas, Canada, and Colombia, was established to study the application of Article 6.B of the PAHO Constitution to Member States more than two years in arrears in the payment of their quota contributions. The working party met once and submitted its report at the third meeting of the Council, at which time Resolution CD47.R2 on the subject was adopted.

**Other Matters**

13. In addition to the topics reflected in the resolutions and decisions and the agenda, reproduced in their entirety in the present report, the following matters are noted.

14. At the first meeting:
Dr. Andrew von Eschenbach, Acting Commissioner of the Food and Drug Administration of the United States of America, addressed the Council, discussing the opportunity to unite as one world in one quest to prevent and eradicate disease and the commitment of the Food and Drug Administration to join with ministers and leaders of health in building the bridge between the promise of science and technology and the delivery of interventions that can eradicate disease.

Dr. José Miguel Insulza, Secretary-General of the Organization of American States, addressed the Council, emphasizing that through the collaboration of PAHO and the OAS, they can improve the capacities for service to the peoples of this Hemisphere.

At the second meeting:

The agenda item on the Strategic Alliance for the Attainment of the Development Goals of the United Nations Millennium Declaration was discussed by a panel of experts, composed of Dr. José Miguel Insulza, Secretary-General of the Organization of American States; Mr. Francisco Javier Salazar Saenz, Secretary of Labor of Mexico; Dr. Ginés González García, Minister of Health of Argentina; and Mr. Jorge Hernán Chiriboga, Vice Minister of Agriculture and Livestock of Ecuador.

The Abraham Horwitz Award for Leadership in Inter-American Health, 2006, was presented to Dr. James H. Steele, of the United States of America. The PAHO Award for Administration, 2006, was given to Dr. Adolfo Horacio Chorny, of Brazil, and accepted on his behalf by the Minister of Health of Brazil.

At the third meeting:

A minute of silence was held in tribute to the memory of Dr. Barrington Wint, Chief Medical Officer of Jamaica, who died on 7 September 2006.

A minute of silence was held in tribute to the memory of Dr. Jong-wook LEE, Director-General of the World Health Organization, who passed away on 22 May 2006.

Dr. Anders Nordström, Acting Director-General of the World Health Organization, addressed the Council, sharing his perspectives for the Organization on the public health challenges facing the world and on attaining global success in improving the health of all people.
17. At the fourth meeting, the agenda item on the Commission on Social Determinants of Health was discussed by a panel of experts, composed of Dr. Bernard Nottage, Minister of Health and National Insurance of the Bahamas; Dr. Lidia Amarles, Vice Minister of Health of Chile; Sir Michael Marmot, Chair of the Commission, Professor of Epidemiology and Public Health, and Director of the International Center for Health and Society at University College, London; and Dr. Paolo Buss, President of the Oswaldo Cruz Foundation and member of the Brazilian Academy of Medicine. The panel recognized that the proximate causes of ill health should be situated in a broader framework comprising social context, structural determinants, and intermediate determinants and described what was being done on these determinants.

18. At the fifth meeting, the agenda item on Human Resources in Health—Critical Challenges for the Region of the Americas was introduced by Dr. Gilles Dussault of the Institute of Hygiene and Tropical Medicine at the New University of Lisbon in Portugal and amply addressed by the delegates in three round tables.

19. At the ninth meeting, the Directing Council heard a presentation on the report of the Advisory Committee on Health Research.

Meetings

20. The Directing Council held nine meetings.

Resolutions and Decisions

Resolutions

CD47.R1: Disability: Prevention and Rehabilitation in the Context of the Right to the Enjoyment of the Highest Attainable Standard of Physical and Mental Health and Other Related Rights

THE 47th DIRECTING COUNCIL,


Bearing in mind that approximately 60 million people in the Region of the Americas are currently living with some type of disability;
Aware that disability may arise from perinatal risks and childbirth, chronic
diseases, malnutrition, accidents of all types, violence (especially gender violence), armed
conflicts, occupational risk factors, poverty, drug and substance abuse, and the aging of
the population;

Underscoring that persons with disabilities often have limited physical and
financial access to treatment, essential drugs, and good quality health products, services,
and rehabilitation compared to other human beings;

Recalling the International Classification of Functioning, Disability, and Health,
officially ratified during the 54th World Health Assembly in 2001, the Inter-American
Convention on the Elimination of All Forms of Discrimination against Persons with
Disabilities, and Resolution CD43.R10 of the Directing Council of PAHO (2001), which
urges the Member States to update the legal provisions protecting the human rights of
persons with mental disabilities;

Considering that the United Nations Ad Hoc Committee has adopted the draft text
of the “Comprehensive and Integral International Convention on the Protection and
Promotion of the Rights and Dignity of Persons with Disabilities;” and

Mindful of Declaration AG/DEC.50 (XXXVI-0/06) on the “Decade of the
Americas for the Rights and Dignity of Persons with Disabilities (2006-2016), approved
by the OAS General Assembly during its Thirty-Sixth Regular Session in Santo
Domingo, the Dominican Republic,

RESOLVES:

1. To urge the Member States to:

   (a) consider ratifying or acceding to the Inter-American Convention on the
       Elimination of All Forms of Discrimination against People with Disabilities
       (OAS) and raise public awareness to promote and protect the human rights and
       fundamental freedoms of persons with disabilities;

   (b) adopt national policies, strategies, plans, and programs on disability, its
       prevention, and rehabilitation that respect international standards on disability
       such as the United Nations Standard Rules for the Equalization of Opportunities
       for Persons with Disabilities;

   (c) adopt a comprehensive rehabilitation model, whose primary objective is to
       prevent, minimize, or reverse the consequences of the loss or alteration of
       functions and influence the factors that impede full participation;
(d) adopt measures to facilitate the safe use and access by all people to shared infrastructure and spaces, public and private, urban and rural, including furnishings and other supportive equipment, transportation, communication, and information, especially the health and rehabilitation services necessary for maintaining functional capacity;

(e) promote the creation of community rehabilitation programs and strategies with the participation of the organizations for persons with disabilities linked with health care at different levels, and integrated into the health system;

(f) promote the development of health policies and programs that include the prevention and detection of disabilities, and early intervention to address them, counseling for families and persons with disabilities; and the consideration of persons with disabilities in all health initiatives;

(g) promote the delivery of appropriate, timely, and effective medical care for persons with disabilities, including access to diagnostic and rehabilitation services, as well as services that provide assistive technologies that facilitate the functional independence of persons with disabilities to achieve their integration into society;

(h) consider guaranteeing to persons who cannot perform their activities of daily living on their own, and to their families and caretakers, access to the basic services that they require, based on their degree of functional need;

(i) safeguard the human rights of persons with disabilities, including equal access to health care, education, housing, and employment;

(j) foster respect for the rights and dignity of persons with disabilities and combat stereotypes, prejudices, and harmful practices relating to persons with disabilities;

(k) strengthen and develop rehabilitation services for all persons, regardless of their disability, so that they can achieve and maintain an optimal level of function, autonomy, and well-being;

(l) promote research on the causes of disabilities and effective measures to prevent them that includes the use of methodologies for recording and analyzing disability data;

(m) amend their disability laws as appropriate and adapt them to conform with the applicable international norms and standards, and
(n) participate in and collaborate as appropriate with the Committee of the Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities.

2. To request the Director to:

(a) consolidate and strengthen PAHO’s commitment to cooperate with the Member States to promote and protect the quality of life of persons with disabilities and their enjoyment of the highest attainable standard of physical and mental health and other rights, ensuring especially that all of their programs and initiatives make use of the necessary information and statistics in this area;

(b) promote disability incidence, prevalence, and cause studies as the basis for risk factor reduction and prevention, treatment, and rehabilitation strategies;

(c) facilitate Member States’ collaboration with teaching institutions, the private sector, and nongovernmental organizations, especially organizations of persons with disabilities and those that promote the protection of and respect for persons with disabilities, in order to take steps to reduce the risk factors that lead to disabilities and protect enjoyment of the highest attainable standard of health and other rights of persons with disabilities; and

(d) consolidate and strengthen the technical collaboration of PAHO with the committees, organs, and rapporteurships of the United Nations and inter-American systems devoted to protecting the rights of persons with disabilities, such as the Ad Hoc Committee on the Comprehensive and Integral International Convention on the Protection and Promotion of the Rights and Dignity of Persons with Disabilities and the Committee of the Inter-American Convention on the Elimination of All Forms of Discrimination against Persons with Disabilities, among others.

(Second Meeting, 25 September 2006)

CD47.R2: Report on the Collection of Quota Contributions

THE 47th DIRECTING COUNCIL,

Having considered the report of the Director on the collection of quota contributions (Document CD47/22 and Add. 1), and the concern expressed by the 138th Meeting of the Executive Committee with respect to the status of the collection of quota contributions;
Noting that Dominica is in arrears in the payment of its quota assessments such that it is subject to Article 6.B of the Constitution; and

Noting that all Member States subject to an approved deferred payment plan are in compliance with their plans,

**RESOLVES:**

1. To take note of the report of the Director on the collection of quota contributions (Document CD47/22 and Add. I).

2. To express appreciation to those Member States which have already made payments in 2006, and to urge all Members 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 2006.

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

5. To request the President of the Directing Council to notify the Delegation of Dominica that its voting rights have been suspended as of this 47th Session of the Directing Council.

6. To take note that all Member States are in material compliance with their approved payment plans and, therefore, shall retain the right to vote.

7. To request the Director to:

   (a) continue to monitor the implementation of special payment agreements by Member States in arrears for the payment of prior years’ quota assessments;

   (b) continue to explore mechanisms that will increase the rate of collection of quota assessments;

   (c) advise the Executive Committee of Member States’ compliance with their quota payment commitments;

   (d) report to the 27th Pan American Sanitary Conference on the status of the collection of quota contributions for 2007 and prior years.

*(Third Meeting, 26 September 2006)*
CD47.R3: Health Agenda for the Americas 2008-2017

THE 47th DIRECTING COUNCIL,

Having reviewed Document CD47/8 regarding the development of a Health Agenda for the Americas 2008-2017;

Recognizing the value and the need for such an Agenda for Member States, as well as for other stakeholders working to improve public health in the Americas; and

Noting with satisfaction the progress to date on the elaboration of the Agenda,

RESOLVES:

1. To congratulate the Ad hoc Consultative Group and the Working Group on the Health Agenda for the Americas 2008-2017 on their accomplishments and progress, and recognize the exceptional commitment of time and resources of the Member States participating in these groups.

2. To endorse the recommendations contained in Document CD47/8 regarding the development of a Health Agenda for the Americas.

3. To encourage all Member States in the Region of the Americas to engage in the Health Agenda for the Americas as it is further developed through a broad and participative series of consultations during the remainder of 2006 and 2007.

4. To request the Director to support the joint work of the Member States as they define and endorse the Health Agenda for the Americas 2008-2017.

5. To request the Director to ensure that the agreements reached in the Health Agenda for the Americas 2008-2017 are reflected in the development of the Strategic Plan of the Pan American Sanitary Bureau 2008-2012.

(Fifth Meeting, 27 September 2006)

CD47.R4: Process for the Election of the Director of the Pan American Sanitary Bureau

THE 47th DIRECTING COUNCIL,

Having considered the recommendations contained in Document CD47/3,
RESOLVES:

1. To approve the following Rules governing the election process for the position of Director of the Pan American Sanitary Bureau:

RULES GOVERNING THE ELECTION PROCESS FOR THE POSITION OF DIRECTOR OF THE PAN AMERICAN SANITARY BUREAU

Article I
Nominating Guidelines

1.1 Candidates nominated for the post of Director of the Pan American Sanitary Bureau should have:

(1) a strong technical and public health background, extensive experience in international health and understanding of the inter-American and United Nations systems;

(2) a proven history and evidence of public health leadership, and management skills appropriate for a complex health-related organization;

(3) sensitivity to and respect for the cultural, social, political, and economic diversity within and among the countries in the Region;

(4) knowledge of the regional health situation and of the wide range of health systems in the Region;

(5) a strong commitment to the work of PAHO;

(6) good physical condition, as required of all staff members of the Organization;

(7) fluency in one of the official languages and a working knowledge of one of the others.

1.2 Candidates should be willing to sign the mandated PAHO and WHO Declaration of Conflict of Interest.

Article II
Presentation of Nominations

2.1 The process for electing the Director shall begin at least six months prior to the date fixed for the opening session of the Pan American Sanitary Conference (the
2.2 Following the Nominating Guidelines in Article I above, each Member State, Participating State, or Associate Member may submit the name of only one national from a country within the Region as a candidate for the post of Director, in a sealed, confidential envelope addressed to the President of the Executive Committee, c/o Legal Counsel, Pan American Health Organization, Washington, D.C., at least four months prior to the opening session of the Conference or by 1 May, which ever comes first, after which time the nomination period shall be closed. Nominations should include a curriculum vitae of the proposed candidate.

2.3 All nominations received shall be compiled by the Bureau, translated into the four official languages of the Organization, and forwarded by the President of the Executive Committee to the Member States, Participating States, and Associate Members at least three months prior to the opening session of the Conference or by 1 June, which ever comes first.

Article III
Candidate’s Forum

3.1 The President of the Executive Committee shall invite nominated candidates to make a presentation to all Member States, Participating States, and Associate Members wishing to attend a Candidate’s Forum to be held on the margins of the Executive Committee session proceeding the session of the Conference.

3.2 Information regarding the time, date, and logistics of the Candidate’s Forum shall be sent by the President of the Executive Committee to the nominated candidates and to all Member States, Participating States, and Associate Members immediately after the closure of the presentation of candidatures as specified in Article 2.3 above.

3.3 Nominated candidates shall be responsible for all expenses related to their participation in the Candidate’s Forum.

3.4 Members States, Participating States, and Associate Members shall be responsible for all expenses related to their participation in the Candidate’s Forum.
3.5 Wherever possible, modern technology will be utilized to facilitate the widest possible participation of all of the Organization’s membership, including video conferencing. Verbatim transcripts of the presentations and discussions at the Candidate’s Forum will also be made available.

3.6 The order of the presentations to be made by the candidates shall be determined by lot, and candidates will be called one at a time. Candidates shall be allowed no more than 30 minutes to make an oral presentation and one hour for questions and answers from Member States, Participating States, and Associate Members in attendance. The oral presentation shall include the candidate’s platform outlining their vision, proposed policy priorities, and financial and programmatic direction for the Organization. The time limit should be strictly adhered to.

Article IV
Candidates Who Are PAHO or WHO Staff Members

4.1 For the purposes of these Rules, a Director seeking reelection, staff members of PAHO or WHO, and any other person in an employment relationship with the Organization who has been nominated for the post of Director shall be considered as “internal candidates.”

4.2 In conformity with the international character of their functions, no internal candidate may make direct or indirect use of their positions to further their candidacies, and shall not use the resources of the Organization for campaign purposes.

4.3 In pursuing their candidacy, no internal candidate shall communicate restricted, confidential, or otherwise privileged information to anyone or use that information to their private advantage.

4.4 In consideration of Staff Regulation 1.8, Internal Candidates for the post of Director shall either resign or take leave from the Organization, as applicable, once the nominations are forwarded by the President of the Executive Committee to Member States, Participating States, and Associated Members pursuant to Article 2.3 of these Rules. The period of leave shall last until the election or until such time as the staff member withdraws his or her candidacy. In the case of leave, the staff member shall first be placed on annual leave until such leave has been exhausted and then, as necessary, on leave with pay. During such time, the staff member shall not represent the Organization in any manner whatsoever. Except for the Director, Deputy Director and Assistant Director, a staff member whose candidacy was not successful, and who opted to take leave shall have the right to return to the position that he or she occupied previously in the
Organization or, at the discretion of the Organization, to another position at a level equal to the grade held previously to taking such leave.

4.5 The foregoing Section 4.4 shall not apply to the Director in office. Nonetheless, the Director shall strictly conform to the requirements of Sections 4.2 and 4.3 of these Rules, for the entire period preceding the election.

4.6 For the purpose of conserving the independence and impartiality inherent in the international character of their function, and to assure that a level playing field is maintained in the election of the Director, staff members of PAHO or WHO and any other person in an employment relationship with the Organization, shall not engage in campaign activities for or otherwise support any candidate for the position of Director.

4.7 Failure to observe the provisions established in this Article constitutes serious misconduct and shall result in disciplinary action, which may include summary dismissal, under the applicable Staff Rules and Regulations, or breach of contract and grounds for termination, as applicable.

4.8 In the case of internal candidates who are staff members of WHO, the President of the Executive Committee shall request the Director-General of WHO to consider the application of Article IV of these Rules to such candidates.

Article V
Election

5.1 The Conference shall elect the Director by secret ballot from among the nominated candidates, in conformity with Article 21, paragraph A, of the Constitution and the Rules of Procedure of the Conference.

Article VI
Post Election Measures

6.1 Delegates from Member States, Participating States, or Associate Members participating in the election may not be employed or contracted by the Organization for a period of one year thereafter.

6.2 In the case of Delegates from Member States, Participating States, or Associate Members participating in the election that are appointed as Temporary Advisers, the Secretariat shall present the President of the Executive Committee with an information paper listing all such appointments every three months for a period of one year after the election of the Director.
6.3 In order for the Executive Committee to be apprised of funding authorizations from the Country Variable Allocation and the Regional Director’s Development Fund, a report on such activities shall be prepared by the Secretariat, reviewed by the Director of Administration, and sent to the President of the Executive Committee every three months for a period of six months prior to and a period of one year after the election of the Director.

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2. To replace the existing Rules 55 of the Rules of Procedure of the Directing Council and 56 of the Rules of Procedure of the Pan American Sanitary Conference with the following texts:

Rule 55

“The Council shall elect an ad interim Director by secret ballot, when required, in conformity with Article 21, paragraph A, of the Constitution, Rule 56 of the Rules of Procedure of the Conference and the Rules Governing the Election Process for the Post of Director, as approved by the Directing Council. However, should there be insufficient time prior to the date fixed for the opening session of the Council to permit full compliance with the timeframes outlined in the election process, the President of the Executive Committee shall adjust such timeframes and inform the Members and Associate Members accordingly.”

Rule 56

“The Conference shall elect the Director by secret ballot, in conformity with Article 21, paragraph A, of the Constitution and the Rules Governing the Election Process for the Post of Director, as approved by the Directing Council. The election process shall begin at least six months prior to the date fixed for the opening session of the Conference or by 1 March, which ever comes first, with a notification from the President of the Executive Committee to the Members and Associate Members, inviting nominations for the post of Director to be submitted to the President of the Executive Committee. Such notification shall include a copy of the Rules Governing the Election Process for the Post of Director.

Each Member and Associate Member may submit the name of only one national from a country within the Region as a candidate for the post of Director in accordance with the referenced Rules Governing the Election Process for the Position of Director. The nomination will be sent in a sealed, confidential envelope addressed to the President of the Executive Committee, c/o Legal Counsel, Pan American Health Organization, Washington, D.C., at least four months prior to the opening session of the Conference or
by 1 May, which ever comes first, after which time the nomination period shall be closed. All nominations received shall be compiled by the Bureau, translated into the four official languages of the Organization, and forwarded by the President of the Executive Committee to the Members and Associate Members at least three months prior to the opening session of the Conference or by 1 June, which ever comes first.

In accordance with the Rules Governing the Election Process for the Position of Director, the President of the Executive Committee shall invite nominated candidates to make a presentation to all Members and Associate Members wishing to attend a Candidate’s Forum to be held on the margins of the Executive Committee session preceding the session of the Conference.

The Conference shall elect the Director from among the candidates nominated by the Members and Associate Members in accordance with the Rules Governing the Election Process for the Position of Director. If in the first two ballots no person receives the majority required, two further ballots restricted to the two candidates receiving the largest number of votes in the second of the unrestricted ballots shall then be taken. If no candidate receives the majority required, two unrestricted and two restricted ballots shall be taken alternatively until a candidate is elected.”

(Sixth Meeting, 27 September 2006)

CD47.R5 : Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Argentina, Barbados, and Costa Rica

THE 47th DIRECTING COUNCIL,

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

Considering that Trinidad and Tobago, the United States of America, and Uruguay were elected to serve on the Executive Committee upon the expiration of the periods of Argentina, Barbados, and Costa Rica,

RESOLVES:

1. To declare Trinidad and Tobago, the United States of America, and Uruguay elected to membership on the Executive Committee for the period of three years.
2. To thank Argentina, Barbados, and Costa Rica for the services rendered to the Organization during the past three years by their delegates on the Executive Committee.

(Sixth Meeting, 27 September 2006)


THE 47th DIRECTING COUNCIL,

Having considered the recommendations contained in Document CD47/4,

RESOLVES:

To amend its Rules of Procedure to read as follows:

Rule 2

Notices of convocation together with the provisional agenda shall be sent to all Members, Associate Members, and Observer States not less than 60 days before the date fixed for the opening of a session, except in extraordinary circumstances.

Rule 33

The General Committee shall:

(a) decide the time and place of all meetings;
(b) determine the order of the day of each meeting;
(c) recommend measures to be taken regarding any proposed agenda item submitted after the provisional agenda has been dispatched pursuant to Rule 2, and prior to the adoption of the agenda pursuant to Rule 10;
(d) propose the deferment of any agenda item to a future Council session;
(e) fix the date of the adjournment;
(f) otherwise facilitate the orderly dispatch of the business of the Council.

Rule 9

All working documents relating thereto shall be sent to the Members, Associate Members, and Observer States at least 6 weeks prior to the opening of the session. Such documents shall be concise; any additional information should be attached as an Annex.
Rule 10

The Council shall adopt its own agenda and, in so doing, may make such additions or modifications to the provisional agenda as it may wish, in accordance with these Rules and as recommended by the General Committee.

Rule 12

Except in extraordinary circumstances, a proposal for inclusion of an item in the provisional agenda or agenda shall be accompanied by a working document prepared by the proposer, to serve as a basis for discussion.

Rule 23

The Rapporteur shall be responsible for presenting and drafting, as necessary, proposed resolutions in light of the deliberations of the Council.

Rule 40

Members and Associate Members may propose and the Secretary ex officio may recommend resolutions, amendments, and motions.

Resolutions shall be introduced in writing and shall be handed to the Secretary ex officio, who shall circulate copies to the delegates within 12 hours. Amendments which introduce significant changes in a resolution shall also be submitted in writing. No resolution or significant amendment shall be discussed or put to the vote unless copies of it have been circulated to all delegates at least 24 hours prior to its discussion. Under special circumstances, the President may permit the discussion and consideration of such resolutions or amendments even though they have not been circulated previously.

Proposals shall be voted on in the order in which they are presented except when the Council decides to the contrary. Parts of a proposal or an amendment shall be voted on separately if any delegate so requests.

(Sixth Meeting, 27 September 2006)
THE 47th DIRECTING COUNCIL,

Having considered the Report of the Commission on Intellectual Property Rights, Innovation and Public Health;

Taking into account Resolution WHA59.24 entitled “Public health, innovation, essential health research and intellectual property rights: towards a global strategy and plan of action;”

Recalling that WHO shall soon convene an Intergovernmental Working Group to draw up a global strategy and plan of action to provide a sustainable reference framework for needs-driven essential health research and development, relevant to diseases that disproportionately affect developing countries;

Conscious of the need for adequate incentive for research and the development of treatment for diseases that disproportionately affect developing countries;

Conscious of the need to develop policies to make health a priority and facilitate production, purchase, distribution and quality control of essential medicines that interest the governments, the population, the scientists, and the industry;

Reaffirming that the Doha Ministerial Declaration on the TRIPS Agreement and Public Health confirms that the Agreement does not and should not prevent Members from taking measures to protect public health;

Observing that the Declaration, reiterating the commitment with the TRIPS Agreement, affirms that the Agreement can and should be interpreted and implemented in a manner supportive of WTO members' right to protect public health and, in particular, to promote access to medicines for all;

Recalling that there are medicines for the treatment of diseases that do not have the advantage of innovative financing mechanisms; and

Taking into account the necessity to make accessible to all the combined set of essential medicines,

RESOLVES:

1. To urge Member States to:
(a) actively participate in the Intergovernmental Working Group to draw up a global strategy and plan of action to provide a sustainable reference framework for needs-driven essential health research and development, relevant to diseases that disproportionately affect developing countries;

(b) work to guarantee adequate incentive to research and the development of treatment to neglected diseases or very neglected diseases;

(c) develop policies to make health a priority and facilitate production, purchase, distribution and quality control of essential medicines;

(d) examine the possibility to utilize innovative financing mechanisms, following the model of the Strategic Fund of PAHO, to further the production, purchase, distribution and quality control of essential medicines to recover and promote the health of the most needy population;

(e) continue initiatives of joint negotiation and joint purchasing of medicines to consider the needs of public health, thereby strengthening and enlarging the activities of the Strategic Fund of PAHO;

(f) to encourage trade agreements to take into account the flexibilities contained in the Agreement on Trade-Related Aspects of Intellectual Property Rights and recognized by the Doha Ministerial Declaration on the TRIPS Agreement and Public Health;

(g) study the possibility to adapt, as needed, national laws to take full advantage of the flexibilities foreseen in the TRIPS Agreement.

(Sixth Meeting, 27 September 2006)


THE 47th DIRECTING COUNCIL,

Having seen the Director’s report “Regional Strategy and Plan of Action on Nutrition in Health and Development” (Document CD47/18);

Mindful of the international mandates emerging from the World Health Assembly, in particular Resolutions WHA55.23 and WHA56.23, as well as the
commitments by the Member States of the Region of the Americas to meeting the Millennium Development Goals;

Recognizing the persistence of problems related to nutritional deficiencies, as well as the growing problems associated with nutritional imbalances and excesses in Latin America and the Caribbean;

Underscoring that, with the current trends in the national indicators of undernourishment and low weight-for-age, several of the countries will not meet Target 2 of Millennium Development Goal 1 by the year 2015;

Reiterating that nutrition is a determinant of human development and, at the same time, is affected by a series of social and economic determinants; and

Recognizing the high degree of complementarity between this and other strategies such as: the Integrated Management of Childhood Illness (IMCI) strategy, the Global Strategy for Infant and Young Child Feeding, and the Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet and Physical Activity,

RESOLVES:

1. To urge the Member States to:

   (a) consider the present Regional Strategy and Plan of Action on Nutrition in Health and Development in their development plans and programs, as well as their national budget proposals and discussions;

   (b) promote internal dialogue among institutions in the public sector and between the public and private sectors and civil society to build a national consensus on nutrition, health, and the national development process;

   (c) conduct an internal review and analysis of the present strategy’s relevance and viability in the national context, based on national priorities, needs, and capacities.

2. To request the Director to:

   (a) provide support to the Member States, in collaboration with other international agencies, for an internal analysis of the applicability and appropriateness of the present strategy and take action leading to the adoption of the Regional Strategy on Nutrition in Health and Development;
(b) engage negotiations with other international agencies, scientific and technical institutions, organized civil society, the private sector, and others on the establishment of a regional partnership to guide and monitor implementation of the Regional Strategy on Nutrition in Health and Development.

(Seventh Meeting, 28 September 2006)

**CD47.R9: Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, Including Diet and Physical Activity**

**THE 47th DIRECTING COUNCIL,**

Having considered the report of the Director on a Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases including Diet, Physical Activity, and Health (Document CD47/17, Rev. 1);

Noting Resolution CSP26.R15 (2002) on the public health response to chronic diseases, which recognizes the large economic and social burden of noncommunicable diseases and calls for increased and coordinated technical cooperation from the Pan American Health Organization;

Considering Resolution WHA57.17 Global Strategy on Diet, Physical Activity, and Health (2004), which emphasizes an integrated approach and intersectoral collaboration to improve diets and increase physical activity;

Cognizant that chronic diseases account for 70% of deaths in the Region of the Americas, and that more than half of premature mortality under the age of 70 years is attributed to chronic diseases;

Taking note that chronic diseases are largely preventable and the availability of scientific evidence and cost-effective interventions;

Noting the importance of focusing on the achievement of the Millennium Development Goals, while at the same time addressing the growing burden of chronic diseases which also affect vulnerable population; and

Recognizing the urgency of governments, the private sector, civil society, and the international community to renew their commitment towards the prevention and control of noncommunicable diseases,
RESOLVES:

2. To urge Member States to:
   (a) prioritize the integrated prevention and control of leading chronic diseases and their common risk factors, by establishing and/or strengthening national programs and ensuring resources commensurate to the burden of disease;
   (b) develop and implement national plans and promote the implementation of public policies guided by the Regional Strategy and Plan of Action;
   (c) implement the Plan of Action as appropriate, within an integrated health system approach, based on primary health care, emphasizing intersectoral action, monitoring and evaluating program effectiveness, and resource allocations;
   (d) conduct relevant research, focusing on the risk factors of chronic diseases, effective behavior motivational factors, effective preventive strategies, innovative treatment modalities and technologies, operational and evaluation issues in order to inform policy formulation and best practice with regards to the chronic diseases.

3. To request the Director to:
   (a) strengthen the development of an integrated approach to the prevention and control of chronic diseases, including diet and physical activity, focusing on the needs of low-income countries and vulnerable populations;
   (b) support Member States in their efforts to achieve a comprehensive intersectoral public policy review, to strengthen their health information systems to monitor chronic diseases;
   (c) support Member States in their efforts to strengthen their health information systems to monitor chronic diseases, their risk factors, and the impact of public health interventions;
   (d) support Member States in terms of strengthening the capacity and competencies within the health system for the integrated management of chronic diseases and their risk factors;
   (e) develop new or strengthen existing partnerships within the international community for resource mobilization, advocacy, and collaborative research related to the implementation of the Regional Strategy and Plan of Action.

(Seventh Meeting, 28 September 2006)
THE 47th DIRECTING COUNCIL,

Having considered the report of the Director on the Regional Strategy for Sustaining National Immunization Programs in the Americas (CD47/11, Rev. 1);

Acknowledging that achieving the elimination of rubella and congenital rubella syndrome (CRS) by 2010 will require sustained efforts by the Member States and their development partners;

Taking into account the challenges confronting the ministries of health and finance in the allocation and disbursement of scarce resources for competing high-priority public health interventions including immunization;

Considering the need to make evidence-based decisions, including economic analyses for the introduction of new and underutilized vaccines against epidemiologically important diseases;

Aware that the World Health Organization has endorsed the Global Immunization Vision and Strategies (GIVS) and has promoted achieving the Millennium Development Goals; and

Taking into account the pioneering role and sustained commitment of the Region of the Americas in immunization programs, including the celebration of Vaccination Week in the Americas, and acknowledging the progress achieved so far by Member States,

RESOLVES:

1. To urge the Member States to:

(a) implement policies and operational strategies to achieve greater than 95% coverage of all routine vaccines in all districts or equivalent administrative units and meet the rubella and CRS elimination target by 2010, as previously endorsed by the Directing Council;

(b) explore the potential for expanding legal and fiscal space and identifying new revenue sources to sustainably finance immunization program development, including the introduction of new vaccines against rotavirus, pneumococcus, and human papillomavirus;
support the mortality reduction targets, consistent with GIVS and the Millennium Development Goals for rotavirus, pneumococcus, and human-papillomavirus-associated diseases;

(d) utilize the PAHO Revolving Fund for Vaccine Procurement to purchase new and underutilized vaccines, including seasonal influenza, yellow fever, rotavirus, pneumococcal and human papillomavirus vaccines;

(e) continue supporting the yearly celebration of Vaccination Week in the Americas.

2. To request the Director to:

(a) support country efforts to complete the unfinished immunization agenda of achieving greater than 95% coverage of all routine vaccines in all districts or equivalent administrative units, particularly the poorest districts and municipalities, and indigenous populations;

(b) assist transition in Member States from child to family immunization with an initial focus on rubella vaccination, supporting the elimination target, and on seasonal influenza vaccine introduction to support country pandemic preparedness;

(c) support country activities to integrate in-depth economic studies into the decision-making process for the introduction of new and underutilized vaccines;

(d) assist countries in their efforts to create legal and fiscal space and identify new sources of revenue for sustainable immunization program development;

(e) promote expanded country participation in the PAHO Revolving Fund for all vaccines and encourage the mobilization of voluntary contributions to rapidly increase its capitalization;

(f) search for support mechanisms to guarantee the sustainability of vaccination programs in the developing countries;

(g) prepare, disseminate, and support the implementation of protocols for introducing new vaccines into the national programs, and streamline certification and implementation processes.

(Eighth Meeting, 28 September 2006)
CD47/R11: Methodology for the Formulation of the Strategic Plan for the Pan American Sanitary Bureau, 2008-2012

THE 47th DIRECTING COUNCIL,

Having reviewed Document CD47/9 regarding the development of the Strategic Plan for the Pan American Sanitary Bureau, 2008-2012,

RESOLVES:


2. To assure the Strategic Plan aligns with WHO’s medium-term Strategic Plan, 2008-2013, and responds to the WHO’s Eleventh General Program of Work, 2006-2015, and with the Health Agenda for the Americas, once it is approved.

(Eight Meeting, 28 September 2006)

CD47/R12: Proposed 10-Year Regional Plan on Oral Health for the Americas

THE 47th DIRECTING COUNCIL,

Having considered Document CD47/14 on the Proposed 10-Year Regional Plan on Oral Health for the people of the Americas;

Recognizing that oral health is a critical aspect of general health conditions throughout the Region of the Americas due to its weight in the overall burden of disease, its association with systemic diseases, its causal relationship to the success or failure to meet some of the Millennium Development Goals, and the costs associated with the treatment of oral health diseases and the ability to institute effective oral health promotion and disease prevention measures; and

Recognizing that PAHO has cooperated with the countries of the Region in laying the conceptual and technical foundations for the development of policies, infrastructure, and programmatic capacities related to the national oral health programs,

RESOLVES:

1. To approve the 10-Year Plan on Oral Health for the Americas, and especially support the integration of oral health into the primary care strategy, greater access to
care, and the extension and consolidation of successful programs like fluoridation, improving the organization and delivery of services with the support of other actors working in oral health, such as the private sector, universities, and industry.

2. To urge the Member States to:

(a) make every possible effort to ensure a basic level of access to oral health care, with emphasis on vulnerable groups;

(b) improve oral health programs, establishing public policies in oral health and promoting partnerships with other sectors and areas for the development of oral health programs;

(c) design and implement effective interventions, as well as best practice models and successful programs used in other countries, introducing cost-effective technologies that will facilitate greater access to health services, with emphasis on vulnerable groups, implementing and/or consolidating fluoridation programs;

(d) promote integration of oral health into the primary care strategy, family health, and perinatal health.

3. To request the Director to:

(a) support the implementation of the regional oral health strategy;

(b) promote technical cooperation among countries and strategic partnerships in activities to promote oral health;

(c) promote and facilitate the search for voluntary contributions to strengthen oral health activities.

(Eighth Meeting, 28 September 2006)

**CD47.R13: Amendments to the Financial Regulations**

**THE 47th DIRECTING COUNCIL,**

Having considered the recommendation of the Executive Committee and the proposed revisions to the Financial Regulations as they appear in the Annex of Document CD47/24, and
Taking into consideration that the revisions to the Regulations reflect modern and best practices in financial management, and are in line with the revisions approved by the 58th World Health Assembly (Resolution WHA58.20),

RESOLVES:

To approve the revisions to the Financial Regulations of the Pan American Health Organization as they appear in the Annex of Document CD47/24.

(Ninth Meeting, 29 September 2006)

CD47.R14:  Process for the Appointment of the External Auditor

THE 47th DIRECTING COUNCIL,

Having considered the recommendation of the Executive Committee and the report of the Director on the Process for the Appointment of the External Auditor (Document CD47/25), and

Noting the rules, regulations, and practices of the Pan American Health Organization and the practices of the World Health Organization,

RESOLVES:

1. To thank the Director for the report on the Process for the Appointment of the External Auditor (Document CD47/25).

2. To approve the proposed process for the nomination and appointment of the External Auditor of the Organization at the 27th Pan American Sanitary Conference.

3. To request the Director to submit to the 27th Pan American Sanitary Conference all valid proposals received by the Secretariat.

(Ninth Meeting, 29 September 2006)
CD47.R15: Salary of the Director of the Pan American Sanitary Bureau

THE 47th DIRECTING COUNCIL

Considering the reduction in the staff assessment needed in order to lower the Tax Equalization Fund;

Taking into account the decision of the Executive Committee at its 138th Session to adjust the gross annual salaries of the Deputy Director and Assistant Director; and

Noting the recommendation of the Executive Committee with regard to the gross annual salary of the Director,

RESOLVES

To establish, effective 1 January 2006, the gross salary of the Director of the Pan American Sanitary Bureau at US$176,877 per annum.

(Ninth Meeting, 29 September 2006)

CD47.R16: Amendment to the Staff Regulations of the Pan American Sanitary Bureau

THE 47th DIRECTING COUNCIL

Taking note of the changes that were made to the Staff Rules of the Pan American Sanitary Bureau, as confirmed by the Executive Committee at its 138th session;

Having considered the recommendation of the Executive Committee regarding the renumbering of Staff Regulations 1.12 through 1.15 under a new Article XIII with respect to national employees; and

Bearing in mind the provisions of Staff Regulation 12.1,

RESOLVES

To approve the amendments to Staff Regulations 1.12 through 1.15 with respect to national employees.

(Ninth Meeting, 29 September 2006)
THE 47th DIRECTING COUNCIL,

Whereas, PAHO Member States appearing on the scale adopted by the Organization of American States (OAS) are assessed according to the percentages shown in that scale, adjusted to PAHO membership, in compliance with Article 60 of the Pan American Sanitary Code;

Considering that adjustments are necessary taking into account the assessments of Cuba, the Participating Governments, and Associate Members; and

Bearing in mind that the OAS revised scale of assessments for the year 2008 is not definitive, and that a definitive scale of assessments is scheduled to be presented for approval by the OAS membership at the 37th regular session of the OAS General Assembly in June 2007,

RESOLVES:

To postpone the adoption of a revised scale of assessments of the PAHO membership and request the Executive Committee to revisit the proposed scale to be applied with updated information regarding the status of approval of the OAS scale of quota assessments.

(Ninth Meeting, 29 September 2006)

THE 47th DIRECTING COUNCIL,

Recognizing the progress achieved by the Health of the Indigenous Peoples Initiative and cognizant of the findings of the evaluation of the International Decade of Indigenous People of the World;

Taking note of the existence of inequities in health and access to health care services that affect more than 45 million indigenous people living in the Region of the Americas; and

Considering that the attainment of the internationally agreed-upon health-related development goals, including those contained in the United Nations Millennium
Declaration, cannot be reached unless the specific health needs of excluded populations, such as the indigenous peoples, are addressed,

RESOLVES:

1. To approve the proposed strategic lines of action for PAHO’s technical cooperation on the health of the Indigenous Peoples in the Americas.

2. To urge Member States to:

(a) ensure the incorporation of indigenous peoples’ perspectives into the attainment of the Millennium Development Goals and national health policies;

(b) improve information and knowledge management on indigenous health issues to strengthen evidence-based decision-making and monitoring capacities in the Region;

(c) integrate the intercultural approach into the national health systems of the Region as part of the primary health care strategy;

(d) develop, together with PAHO/WHO, strategic alliances with indigenous peoples and other stakeholders to further advance the health of the indigenous peoples;

(e) promote the training, education and leadership development of indigenous healers, and their incorporation in the health system formally, where appropriate;

(f) promote the incorporation of the intercultural approach in the curricula of all training and degree programs in areas of health and related fields and its implementation in all health institutions;

(g) promote the establishment of permanent mechanisms of consultation with indigenous communities for health decisions related to them;

(h) train human resources from the health system to act as intercultural facilitators.

3. To request the Director to:

(a) support the development and implementation of the proposed strategic lines of action for PAHO’s technical cooperation, including the opportunity for developing a Regional Plan for the Health of the Indigenous Peoples;
(b) advocate the mobilization of national and international resources to support efforts to improve the health of the indigenous peoples in the Region;

(c) ensure the inclusion of the proposed strategic lines of action into the Pan American Sanitary Bureau Strategic Plan 2008-1012 and promote their inclusion in the Ten-Year Health Agenda for the Americas.

(Ninth Meeting, 29 September 2006)


THE 47th DIRECTING COUNCIL,

Having considered the report of the Director on neonatal health in the context of maternal, newborn, and child health for the attainment of the development goals of the United Nations Millennium Declaration (Document CD47/12);

Acknowledging that the Region still faces persistently high neonatal mortality rates and that the achievement of reduced neonatal mortality will require enhanced efforts by countries and their development partners;

Considering that the PAHO Governing Bodies have adopted Resolutions CSP26.R13 Regional Strategy for Maternal Mortality and Morbidity Reduction, and CD45.R3 Millennium Development Goals and Health Targets;

Considering that Resolution WHA57.12 endorses the WHO Global Strategy on Reproductive Health; and

Aware that the World Health Organization hosts the Global Partnership on Maternal, Neonatal, and Child Health, which formulated the Delhi Declaration on Maternal, Newborn, and Child Health, demonstrating the world’s commitment to achieving time-bound and quantifiable improvements in development and poverty reduction by 2015,

RESOLVES:

1. To urge Member States to:
(a) review the current situation of neonatal health and carry out ongoing targeted advocacy to place newborn health as a policy priority within the context of maternal, newborn, and child health and care;

(b) support sectorwide and service-delivery-level partnerships for defining innovative and integrated maternal, neonatal, and child health interventions;

(c) participate in the formulation of the Regional Strategy and Plan of Action on Neonatal Health within the Continuum of Maternal, Newborn, and Child Care;

(d) promote the creation and participation of social networks that support the improvement of neonatal health in the Region of the Americas;

(e) adopt preventive strategies such as the administration of folic acid to women of childbearing age and mothers for the prevention of birth defects, neonatal screening, and preventive prenatal counseling to prevent birth defects;

(f) develop interventions that incorporate equitable, culturally and linguistically appropriate health service delivery.

(g) To request the Director to:

(a) prepare a regional integrated strategy and plan of action on neonatal health within the continuum of maternal, newborn, and child care, addressing inequities and targeting vulnerable and marginalized groups, including intermediate goals for 2010 and 2015;

(b) urge the countries to report on their progress in this area every three years.

(c) include in the Regional Plan of Action strategies to deal with diverse situations among and within countries, which in turn implies specific technical cooperation adapted to each reality.

(Ninth Meeting, 29 September 2006)
Recognizing the importance of following up on the commitments made in the Mexico Ministerial Statement for the Promotion of Health in 2000; and

Recalling Resolution CD43.R11 for strengthening planning activities for health promotion in the Americas,

RESOLVES:

1. To urge the Member States to:
   (a) accelerate country efforts, as appropriate, with respect to the five strategic actions enumerated in the Ottawa Charter;
   (b) consider, as appropriate, the specific steps to take with respect to the five actions contained in the Bangkok Charter, especially in investment and capacity building; as well as the four commitments in that same Charter, in particular those pertaining to the responsibility of all spheres of government;
   (c) exercise the intrasectoral stewardship role in health promotion in national programs;
   (d) include health promotion as a central strategy in the Health Agenda for the Americas, which should include an intercultural approach.

2. Request the Director to:
   (a) reaffirm the request contained in resolution CD43.R11 to establish mechanisms to ensure the appropriate follow up evaluation, and progress reports;
   (b) support and promote technical and methodological development through knowledge management, and cooperation, including the analysis of determinants, and evaluation of their effectiveness;
   (c) likewise, ensure that this task is included in the Strategic Plan of the Organization;
   (d) strengthen the Organization’s stewardship role in health promotion to promote its effectiveness in the different technical areas;
   (e) strengthen interagency cooperation, exercising the Organization’s steering role in this area, with a view to improving programs and their linkage through the mobilization of resources.

(Ninth Meeting, 29 September 2006)
Decisions

**CD47(D1): Committee on Credentials**

Three delegates, from Nicaragua, Suriname, and Uruguay, respectively, were appointed members of the Committee on Credentials.

(First meeting, 25 September 2006)

**CD47(D2): Officers**

Guyana (Hon. Dr. Leslie Ramsammy) was elected to the Presidency, Ecuador (Dr. Guillermo Wagner Cevallos) and Haiti (Dr. Roberto Auguste) to the Vice Presidencies, and Panama (Dr. Camillo Alleyne) to the office of Rapporteur.

(First meeting, 25 September 2006)


Three delegates, from the Bahamas, Canada, and Colombia, respectively, were elected members of the Working Party.

(First meeting, 25 September 2006)

**CD47(D4): General Committee**

Three delegates, from Honduras, Puerto Rico, and the United States of America, respectively, were elected members of the General Committee.

(First meeting, 25 September 2006)

**CD47(D5): Agenda**

Pursuant to Rule 10 of the Rules of Procedure, the Directing Council adopted the provisional agenda, (Document CD47/1, Rev. 3) presented by the Director.

(First meeting, 25 September 2006)
CD47(6):  *Annual Report of the President of the Executive Committee*

The Directing Council took note of the report of the President of the Executive Committee on the activities of the Committee and its Subcommittees in the period between September 2005 and September 2006.

*(Second meeting, 25 September 2006)*

CD47(D7):  *Annual Report of the Director of the Pan American Sanitary Bureau*


*(Third meeting, 26 September 2006)*


*(Eighth meeting, 28 September 2006)*

CD47(D9):  *Policy and Coordination Committee of the UNDP/World Bank/WHO Special Program of Research, Development, and Research Training in Human Reproduction*

Argentina and Mexico were selected to respectively designate a representative to the Policy and Coordination Committee of the UNDP/World Bank/WHO Special Program of Research, Development, and Research Training in Human Reproduction for a three-year term beginning 1 January 2007.

*(Sixth meeting, 27 September 2006)*
CD47(10):  *Joint Coordination Board of the UNICEF/UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR)*

Brazil was selected to designate a person to serve on the Joint Coordinating Board of the UNICEF/UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR) for a three-year term beginning 1 January 2007.

*(Sixth meeting, 27 September 2006)*
IN WITNESS WHEREOF, the President of the 47th Directing Council, Delegate of Guyana, and the Secretary ex officio, Director of the Pan American Sanitary Bureau, sign the present Final Report in the English and Spanish languages, the two texts being equally authentic.

DONE in Washington D.C., United States of America, this twenty-ninth day of September in the year two thousand and six. The Secretary shall deposit the original texts in the archives of the Pan American Sanitary Bureau and shall send copies thereof to the Member States of the Organization.

____________________________________
Leslie Ramsammy
President of the 47th Directing Council
Delegate of Guyana

_______________________________________
Mirta Roses Periago
Secretary ex officio of the 47th Directing Council
Director of the Pan American Sanitary
AGENDA

1. Opening of the Session

2. Procedural Matters
   2.1 Appointment of the Committee on Credentials
   2.2 Election of the President, Two Vice Presidents, and the Rapporteur
   2.3 Establishment of a Working Party to Study the Application of Article 6.B of the PAHO Constitution
   2.4 Establishment of the General Committee
   2.5 Adoption of the Agenda
   2.6 Process of Election of the Director of the Pan American Sanitary Bureau
   2.7 Improvement of the Rules of Procedure of the Directing Council

3. Constitutional Matters
   3.1 Annual Report of the President of the Executive Committee
   3.2 Annual Report of the Director of the Pan American Sanitary Bureau
   3.3 Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Argentina, Barbados, and Costa Rica

4. Program Policy Matters
   4.1 Development of a Health Agenda for the Americas, 2008-2017
   4.2 Methodology for the Formulation of the Strategic Plan for the Pan American Sanitary Bureau, 2008-2012
4. **Program Policy Matters (cont.)**


4.4 Regional Strategy for Sustaining National Immunization Programs in the Americas

4.5 Neonatal Health in the Context of Maternal, Newborn, and Child Health for the Attainment of the Development Goals of the United Nations Millennium Declaration

4.6 Health of the Indigenous Peoples of the Americas

4.7 Proposed 10-Year Regional Plan on Oral Health

4.8 Disability: Prevention and Rehabilitation in the Context of the Enjoyment of the Highest Attainable Standard of Physical and Mental Health and Other Related Rights

4.9 Health Promotion: Achievements and Lessons Learned from Ottawa to Bangkok

4.10 Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet, Physical Activity, and Health


4.12 Commission on Social Determinants of Health: Panel Discussion

4.13 Human Resources in Health—Critical Challenges for the Region of the Americas: Round Tables


4. **Program Policy Matters (cont.)**


5. **Administrative and Financial Matters**

5.1 Report on the Collection of Quota Contributions


5.3 Report on the Activities of the Internal Oversight Services

5.4 Amendments to the Financial Regulations

5.5 Process for the Appointment of the External Auditor

5.6 Process for Implementing the New Scale of Quota Assessments Based on the New OAS Scale

5.7 Salary of the Director and Amendments to the Staff Rules and Staff Regulations of the Pan American Sanitary Bureau

6. **Committee Matters**

6.1 Selection of Two Member States from the Region of the Americas Entitled to Designate a Representative to the Policy and Coordination Committee of the UNDP/World Bank/WHO Special Program of Research, Development, and Research Training in Human Reproduction on the Expiration of the Periods of Office of Colombia and Ecuador

6.2 Selection of One Member State from the Region of the Americas Entitled to Designate a Person to Serve on the Joint Coordinating Board of the UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR), on the Expiration of the Period of Office of Panama
7. **Awards**

7.1 PAHO Award for Administration, 2006

7.2 Abraham Horwitz Award for Leadership in Inter-American Health, 2006

8. **Matters for Information**

8.1 Update on the Process of Institutional Strengthening of the Pan American Sanitary Bureau

8.2 Review of the Pan American Centers

8.3 Progress Report on National and Regional Health Disaster Preparedness and Response

8.4 Influenza Pandemic: Progress Report

8.5 Report of the Advisory Committee on Health Research

8.6 Resolutions and Other Actions of the Fifty-ninth World Health Assembly of Interest to the Regional Committee

9. **Other Matters**

10. **Closure of the Session**
## LIST OF DOCUMENTS

### Official Documents

**Official Document 323**  

### Working Documents

<table>
<thead>
<tr>
<th>Document</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>CD47/1, Rev.4</td>
<td>Adoption of the Agenda and Program of Meetings</td>
</tr>
<tr>
<td>CD47/WP/1, Rev. 1</td>
<td></td>
</tr>
<tr>
<td>CD47/3</td>
<td>Process of Election of the Director of the Pan American Sanitary Bureau</td>
</tr>
<tr>
<td>CD47/5 and Corrig.</td>
<td>Annual Report of the President of the Executive Committee</td>
</tr>
<tr>
<td>CD47/6 and Corrig.</td>
<td>Annual Report of the Director of the Pan American Sanitary Bureau</td>
</tr>
<tr>
<td>CD47/7</td>
<td>Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Argentina, Barbados, and Costa Rica</td>
</tr>
<tr>
<td>CD47/8 and Corrig.</td>
<td>Development of a Health Agenda for the Americas, 2008-2017</td>
</tr>
<tr>
<td>CD47/9 and Corrig.</td>
<td>Methodology for the Formulation of the Strategic Plan for the Pan American Sanitary Bureau, 2008-2012</td>
</tr>
<tr>
<td>CD47/11, Rev. 1</td>
<td>Regional Strategy for Sustaining National Immunization Programs in the Americas</td>
</tr>
<tr>
<td>CD47/FR, Rev. 1 (Eng.)</td>
<td>Working Documents (cont.)</td>
</tr>
<tr>
<td>-----------------------</td>
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</tr>
<tr>
<td>Annex B</td>
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</tr>
<tr>
<td>- 2 -</td>
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</table>

- **CD47/12**  
  Neonatal Health in the Context of Maternal, Newborn, and Child Health for the Attainment of the Development Goals of the United Nations Millennium Declaration

- **CD47/13**  
  Health of the Indigenous Peoples of the Americas

- **CD47/14**  
  Proposed 10-Year Regional Plan on Oral Health

- **CD47/15 and Corrig**  
  Disability: Prevention and Rehabilitation in the Context of the Enjoyment of the Highest Attainable Standard of Physical and Mental Health and Other Related Rights

- **CD47/16**  
  Health Promotion: Achievements and Lessons Learned from Ottawa to Bangkok

- **CD47/17, Rev. 1**  
  Regional Strategy and Plan of Action on an Integrated Approach to the Prevention and Control of Chronic Diseases, including Diet, Physical Activity, and Health

- **CD47/18**  

- **CD47/19**  
  Human Resources in Health—Critical Challenges for the Region of the Americas: Round Tables

- **CD47/20**  

- **CD47/21, Corrig., Corrig. 2 and Corrig. 3**  

- **CD47/22, Add. I and Add. II**  
  Report on the Collection of Quota Contributions

- **CD47/23**  
  Report on the Activities of the Internal Oversight Services

- **CD47/24**  
  Amendments to the Financial Regulations

- **CD47/25**  
  Process for the Appointment of the External Auditor
Working Documents (cont.)

CD47/26  Process for Implementing the New Scale of Quota Assessments Based on the New OAS Scale

CD47/27  Salary of the Director and Amendments to the Staff Rules and Staff Regulations of the Pan American Sanitary Bureau

CD47/28  Selection of Two Member States from the Region of the Americas Entitled to Designate a Representative to the Policy and Coordination Committee of the UNDP/World Bank/WHO Special Program of Research, Development, and Research Training in Human Reproduction on the Expiration of the Periods of Office of Colombia and Ecuador

CD47/29  Selection of One Member State from the Region of the Americas Entitled to Designate a Person to Serve on the Joint Coordinating Board of the UNDP/World Bank/WHO Special Program for Research and Training in Tropical Diseases (TDR), on the Expiration of the Period of Office of Panama

CD47/30  PAHO Award for Administration, 2006

CD47/31  Abraham Horwitz Award for Leadership in Inter-American Health, 2006


CD47/33  Update on the Process of Institutional Strengthening of the Pan American Sanitary Bureau

CD47/34  Progress Report on National and Regional Health Disaster Preparedness and Response

CD47/35  Report of the Advisory Committee on Health Research
### Information Documents

<table>
<thead>
<tr>
<th>CD47/INF/1</th>
<th>Commission on Social Determinants of Health: Panel Discussion</th>
</tr>
</thead>
<tbody>
<tr>
<td>CD47/INF/2</td>
<td>Strategic Alliance for the Attainment of the Development Goals of the United Nations Millennium Declaration: Panel Discussion</td>
</tr>
<tr>
<td>CD47/INF/3</td>
<td>Review of the Pan American Centers</td>
</tr>
<tr>
<td>CD47/INF/4</td>
<td>Progress Report on National and Regional Health Disaster Preparedness and Response</td>
</tr>
<tr>
<td>CD47/INF/5</td>
<td>Influenza Pandemic: Progress Report</td>
</tr>
<tr>
<td>CD47/INF/6</td>
<td>Resolutions and Other Actions of the Fifty-ninth World Health Assembly of Interest to the Regional Committee</td>
</tr>
</tbody>
</table>
LIST OF PARTICIPANTS
LISTA DE PARTICIPANTES

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Ganadores de los Premios

PAHO Award for Administration, 2006
Premio OPS en Administración, 2006

Dr. Adolfo Horacio Chorny
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Abraham Horwitz Award for Leadership in Inter-American Health, 2006
Premio Abraham Horwitz al Liderazgo en la Salud Interamericana, 2006

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The Global Fund to Fight AIDS, Tuberculosis, and Malaria
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International Association for Dental Research
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International Catholic Committee of Nurses and Medico-Social Assistants
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International Council for Control of Iodine Deficiency Disorders
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International Special Dietary Foods Industries
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International Federation of Medical Students’ Associations
Federación Internacional de Asociaciones de Estudiantes de Medicina
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International Federation of Pharmaceutical Manufacturers Associations
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Latin American Federation of Hospitals
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World Self-Medication Industry
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