46th DIRECTING COUNCIL
57th SESSION OF THE REGIONAL COMMITTEE

Washington, D.C., USA, 26-30 September 2005

FINAL REPORT

CD46/FR (Eng.)
30 September 2005
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Annex A. Agenda
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1. The 46th Directing Council of the Pan American Health Organization, 57th Session of the Regional Committee of the World Health Organization for the Americas, was held in Washington, D.C., from 26 to 30 September 2005, as convened by the Director of the Pan American Sanitary Bureau.

Participants

2. The following Members 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, Cuba, Dominica, 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. The Government of Spain was represented as an Observer State. The Executive Committee was represented by Dr. William Steiger (United States of America), its President, and Dr. Carlos Vizzotti (Argentina), its Vice President.


Opening of the Council

4. The Council was opened by the outgoing President (Nicaragua), represented by Dr. Israel Kontorovsky. Speakers at the opening ceremony were Dr. Mirta Roses Periago, Director, Pan American Sanitary Bureau; Hon. Mike Leavitt, Secretary, Health

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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.
and Human Services of the United States of America; and Amb. Randall Tobias, Global AIDS Coordinator of the United States of America.

**Officers**

5. Pursuant to Rule 20 of the Rules of Procedure, the Head of Delegation of Nicaragua, which occupied the Presidency of the 45th Directing Council, presided until the elections for office of the 46th Council. As a result of the elections, the following delegates served as officers:

<table>
<thead>
<tr>
<th>Position</th>
<th>Country</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Uruguay</td>
<td>Dr. María Julia Muñoz</td>
</tr>
<tr>
<td>Vice Presidents</td>
<td>El Salvador</td>
<td>Dr. José Guillermo Maza Brizuela</td>
</tr>
<tr>
<td></td>
<td>Saint Lucia</td>
<td>Hon. Damian Greaves</td>
</tr>
<tr>
<td>Rapporteur</td>
<td>Puerto Rico</td>
<td>Dr. Aída González de Gregory</td>
</tr>
<tr>
<td>Secretary</td>
<td>Director, Pan American Sanitary Bureau</td>
<td>Dr. Mirta Roses Periago</td>
</tr>
</tbody>
</table>

6. During the sixth and ninth meetings, Dr. Guillermo Maza (El Salvador) and Hon. Damian Greaves (Grenada), respectively, substituted for Dr. María Julia Muñoz as President.

**Committee on Credentials**

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

<table>
<thead>
<tr>
<th>Position</th>
<th>Country</th>
<th>Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>President</td>
<td>Bolivia</td>
<td>Dr. Álvaro Muñoz Reyes Navarro</td>
</tr>
<tr>
<td>Members</td>
<td>Dominica</td>
<td>Hon. John Fabien</td>
</tr>
<tr>
<td></td>
<td>France</td>
<td>Mr. Raymond Quereilhac</td>
</tr>
</tbody>
</table>

8. The Committee on Credentials met three times and submitted its reports at the first and sixth meetings.
General Committee

9. With the election of Brazil, Cuba, 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: Uruguay Dr. María Julia Muñoz

   Vice Presidents of the Council: El Salvador Dr. José Guillermo Maza Brizuela
                                Saint Lucia Hon. Damian Greaves

   Rapporteur of the Council: Puerto Rico Dr. Aída González de Gregory

   Members: Brazil Dr. Sérgio Gaudêncio
            Cuba Dr. Antonio D. González Fernández
            United States of America Ms. Ann Blackwood

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

Working Parties

11. At the first meeting, a working party, consisting of the Delegates of Canada, Guatemala, and Saint Vincent and the Grenadines, 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 CD46.R1 on the subject was adopted.

Other Matters

12. 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.

13. At the first meeting:

   - A minute of silence was held in sympathy for the victims of the recent natural disasters in the United States of America and Peru.
- Amb. Randall Tobias, Global AIDS Coordinator of the United States of America, addressed the Council, concerning the global HIV/AIDS pandemic, expressing that HIV/AIDS is a major problem in the Americas, indicating the great investment undertaken by the United States directed at this disease, and emphasizing the importance of leadership to overcoming barriers to a comprehensive response.

- The PAHO Award for Administration, 2005, was presented to Dr. Francisco Rojas Ochoa, of Cuba; the Abraham Horwitz Award for Leadership in Inter-American Health, 2005, was presented to Dr. Ricardo Uauy, of Chile; and the Manuel Velasco-Suárez Award in Bioethics, 2005, was presented to Prof. Patricia Sorokin, of Argentina.

14. At the third meeting, Dr. Jong-wook LEE, Director-General of the World Health Organization, addressed the Council, emphasizing the critical need for preparation for the next human influenza pandemic, which necessitates international cooperation and partnerships and all countries having a pandemic control plan, and warning of the huge political, social, and economic costs. He also reiterated the call to provide antiretroviral treatment to 3 million people living with HIV/AIDS by 2005, the “3 x 5” initiative.

15. At the eighth meeting, the Regional Declaration on Primary Health Care (Declaration of Montevideo) was promulgated, signaling the strong commitment of PAHO Member States to develop and implement national health systems that are based on the primary health care approach.

Meetings

16. The Directing Council held nine meetings.

Resolutions and Decisions

Resolutions

CD46.R1 Report on the Collection of Quota Contributions

THE 46th DIRECTING COUNCIL,

Having considered the report of the Director on the collection of quota contributions (Document CD46/22 and Add. 1), and the concern expressed by the 136th
Session of the Executive Committee with respect to the status of the collection of quota contributions;

Noting that Peru is in arrears in the payment of its quota assessments such that it is subject to Article 6.B of the Constitution, and has submitted a proposed deferred payment plan for the settlement of its arrears, which has been accepted by the Secretariat; and

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

RESOLVES:

1. To take note of the report of the Director on the collection of quota contributions (Document CD46/22 and Add. 1).

2. To express appreciation to those Member States which have already made payments in 2005, and to urge all Members 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 2005.

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 Peru that its voting rights have been restored as of this 46th Directing Council.

6. To take note that all Member States are in 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 47th Directing Council on the status of the collection of quota contributions for 2006 and prior years.

(Third meeting, 27 September 2005)

CD46.R2 Process Of Institutional Strengthening Of The Pan American Sanitary Bureau

THE 46th DIRECTING COUNCIL,

Considering the various processes that have systematically examined the workings of the Pan American Health Organization with the goal of strengthening the Organization to better meet the needs of Member States;

Bearing in mind that the 44th Directing Council of PAHO requested the Executive Committee to establish an open-ended working group to review PAHO’s situation in the 21st century and present its report and make recommendations to the Directing Council;

Having considered the Report of the Working Group on PAHO in the 21st Century (Document CE136/5);

Noting Document CE136/14 “Update on the Progress of Institutional Change within the Pan American Sanitary Bureau”; and

Recalling Resolution CE134.R5, requesting the Pan American Sanitary Bureau to report regularly to the Executive Committee on the work of the WHO Office of Internal Oversight Services, and Decision CE135(D7), regarding the implementation of the Recommendations of the Special Report of the External Auditor,

RESOLVES:

1. To congratulate and thank the Working Group on PAHO in the 21st Century for its report.

2. To acknowledge the report of the Working Group on PAHO in the 21st Century and its recommendations.

3. To commend the Director for the institutional changes within the Pan American Sanitary Bureau implemented to date.
4. To request that the WHO Office of Internal Oversight Services report annually to the Executive Committee.

5. To thank the President and past President of the Executive Committee for their work in monitoring the Secretariat’s implementation of the recommendations of the Special Report of the External Auditor.

6. To request the Director to:

(a) implement the recommendations of the Internal Auditor;

(b) complete the implementation of the recommendations of the Special Report of the External Auditor, particularly those focusing on complaints management systems and human resources;

(c) take into account the findings of the report and recommendations of the Working Group on PAHO in the 21st Century, the institutional changes within the Pan American Sanitary Bureau, and the recommendations of the Special Report of the External Auditor, when preparing the next Strategic Plan for the work of the Pan American Sanitary Bureau.

(Sixth meeting, 28 September 2005)

CD46.R3 Appointment of the External Auditor

THE 46th DIRECTING COUNCIL,

Satisfied with the services of the present External Auditor, Sir John Bourn, holder of the Office of Comptroller and Auditor General of the United Kingdom of Great Britain and Northern Ireland, and noting his expressed willingness to continue to serve as External Auditor of the Pan American Health Organization,

RESOLVES:

1. To express its thanks to Sir John Bourn for the work he has performed for the Organization in his audit of the accounts for the financial period 2004-2005.

2. To appoint the holder of the Office of Comptroller and Auditor General of the United Kingdom of Great Britain and Northern Ireland as External Auditor of the accounts of the Pan American Health Organization for the 2006-2007 financial period and to request that he conduct his audit in accordance with the principles set forth in
Article XIV of the PAHO Financial Regulations, with the provision that, should the need arise, he may designate a representative to act in his absence.

3. To request the Director to submit to the 47th Directing Council a call for bids from qualified external auditors of international repute to be considered for appointment as the External Auditor of the accounts of the Pan American Health Organization for the 2008-2009 and 2010-2011 financial periods in accordance with Financial Regulation 14.1.

(Sixth meeting, 28 September 2005)

CD46.R4 Election of Three Member States to the Executive Committee on the Expiration of the Periods of Office of Dominica, Paraguay, and the United States of America

THE 46th 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 Antigua and Barbuda, Chile, and Panama were elected to serve on the Executive Committee upon the expiration of the periods of office of Dominica, Paraguay, and the United States of America,

RESOLVES:

1. To declare Antigua and Barbuda, Chile, and Panama elected to membership on the Executive Committee for the period of three years.

2. To thank Dominica, Paraguay, and the United States of America for the services rendered to the Organization during the past three years by their delegates on the Executive Committee.

(Sixth meeting, 28 September 2005)
THE 46th DIRECTING COUNCIL,

Noting the importance of blood transfusions for appropriate patient care, survival, and quality of life;

Having studied the report of the Director on the progress of the Blood Safety Initiative;

Recognizing the achievements in the screening of infectious markers in blood and the reduction in the potential risk of transfusion-transmitted infections in the Region;

Aware of the efforts made by the Secretariat and the National Blood Programs of the Members States to jointly assess previous work and to develop a regional plan of action for the improvement of transfusion safety in the Americas by the year 2010;

Concerned that the goals identified by the World Health Assembly in 1975 and by the Governing Bodies of the Pan American Health Organization in the past decade have not been achieved in the Region;

Recognizing that in order to achieve sufficient supply, appropriate quality of blood, and appropriate safety of transfusions, the current national approaches need to be revised and adjusted;

Recognizing that the number of voluntary donors in the Region of the Americas is still limited;

Welcoming World Health Assembly Resolution WHA58.13 Blood Safety: Proposal to Establish World Blood Donor Day; and

Motivated by the spirit of Pan Americanism, equity, and the internationally agreed-upon health-related development goals in the United Nations Millennium Declaration,

RESOLVES:

1. To urge Member States to:

(a) analyze the progress and challenges in the pursuit of sufficiency, quality, safety, and appropriate use of blood and blood products in their countries;
(b) officially adopt the Regional Plan of Action for Transfusion Safety 2006-2010, and appropriately allocate and efficiently use resources to obtain its objectives;

(c) promote the participation of the public and private sectors, ministries of education, labor and social development, and civil society in the international, national, and local activities undertaken to implement the Regional Plan;

(d) strengthen blood services and improve their efficiency, while promoting a culture of voluntary, nonremunerated blood donation.

2. To request the Director to:

(a) cooperate with the Member States in the development of their national blood policies and strategies, and the strengthening of blood services to ensure transfusion safety;

(b) promote the application at the local level of quality standards and validated methodologies for the improvement of the safety of blood products and blood transfusion, utilizing a multidisciplinary approach;

(c) work with Member States to monitor the development of the national blood programs and transfusion safety;

(d) report periodically to the Governing Bodies on the progress of implementation of the Regional Plan of Action for Transfusion Safety, including constraints;

(e) mobilize resources in support of the Regional Plan of Action for Transfusion Safety.

(Eighth meeting, 29 September 2005)

CD46.R6 Strategy for the Future of the Pan American Centers

THE 46th DIRECTING COUNCIL,

Having reviewed Document CD46/10 on the current status of the Pan American Centers;

Bearing in mind the current technical cooperation needs identified by Member States, the growing availability of institutional capacity in the countries of the Region,
and the urgent need to make the best possible use of the resources allocated to the Organization;

Recalling that Resolution CSP20.R31 (1978) requested the Director to commence a regular evaluation process of the Pan American Centers;


Being in agreement on a set of general guiding principles or criteria to be applied when deciding on the disestablishment of a Pan American Center, such as: minimizing any potential negative impact on public health in the Region; maximizing the ability of the PAHO Secretariat to deliver technical cooperation in the most efficient and cost-effective way; ensuring that no resources from the PAHO regular budget not originally intended for a Center will be applied to substitute for a host government’s or for subregional Member States’ financial commitments; encouraging the financial contributions of a host government to be secure and sustainable over time; and ensuring the analysis of funding streams and arrearages of a Center, including the impact of such arrearages on a Center’s operations;

Recalling the in-depth evaluation of the Pan American Center for Sanitary Engineering and Environmental Science (CEPIS) presented to the Governing Bodies in 2002, and having reviewed the proposals for the reorganization of CEPIS and the Latin American Center for Perinatology and Human Development (CLAP) in light of the further decentralization of regional technical cooperation; and

Having analyzed the proposals for discontinuing the Pan American Institute for Food Protection and Zoonoses (INPPAZ) as a Pan American Center as presented in Document CD46/10,

RESOLVES:

1. To thank the Director for the report on the current status of the Pan American Centers.

2. To accept the general guiding principles listed above as the criteria to be used whenever the Organization might consider disestablishing a Center.

3. To urge the Member States to:
(a) take note of the reorganization of the Bureau’s Area of Sustainable Development and Environmental Health (SDE), which decentralizes regional technical cooperation in the area of water supply, sewerage, and waste management to CEPIS;

(b) take note of the reorganization of the Bureau’s Area of Family and Community Health (FCH), which decentralizes regional technical cooperation for the monitoring and reduction of reproductive, perinatal, and women’s health risks to CLAP.

4. To request the Director to:

(a) reorganize and streamline the technical cooperation capacity in food safety at country, subregional, and regional levels;

(b) disestablish the Pan American Institute for Food Protection and Zoonoses (INPPAZ), created by Resolution CD35.R21 in 1991;

(c) conduct a cost-effectiveness analysis as part of an assessment to determine the reassignment of the food safety technical cooperation activities of INPPAZ to PANAFTOSA’s or other facilities, including Headquarters;

(d) submit to the 138th Session of the Executive Committee in 2006 a review of the Pan American Foot-and-Mouth Disease Center (PANAFTOSA) and the Latin American and Caribbean Center on Health Sciences Information (BIREME), and a proposal to align the Caribbean Epidemiology Center (CAREC), the Caribbean Food and Nutrition Institute (CFNI), and the Institute of Nutrition of Central America and Panama (INCAP) with the subregional allocation criteria set in the new regional policy, in consultation with the respective institutions.

(Eighth meeting, 29 September 2005)


THE 46th DIRECTING COUNCIL,


(Eighth meeting, 29 September 2005)
Noting Resolution CSP26.R18 “Strategic Plan for the Pan American Sanitary Bureau, 2003-2007,” which requests the Director of PAHO to monitor and evaluate the Strategic Plan’s implementation, as appropriate;

Recognizing the inherent difficulties in assessing progress in terms of health outcomes when data for many health indicators are not consistently available throughout the Region on a timely basis; and

Acknowledging that achievement of the technical cooperation objectives contained in the Strategic Plan 2003-2007 is a collective effort that depends on the work of Member States and the Secretariat with various actors in the health arena in the Americas,

RESOLVES:

1. To express recognition for the Secretariat’s work in preparing the Midterm Assessment.

2. To endorse the proposed revisions to the technical cooperation objectives in the Strategic Plan 2003-2007.

3. To endorse the recommendations for improving the next Strategic Plan for the period 2008-2012.

4. To request the Director to:

   (a) collaborate with Member States to improve and expand the collection and analysis of health data, especially as it relates to measuring achievement against the objectives of the Strategic Plan 2003-2007, and other regional and global commitments;

   (b) take appropriate measures to ensure that the final evaluation of the Strategic Plan 2003-2007 is as complete and comprehensive as possible, especially with respect to availability and timeliness of data to evaluate achievement;

   (c) submit an initial version of the final evaluation of the Strategic Plan 2003-2007 to the Subcommittee on Planning and Programming in March 2008, to facilitate incorporation of lessons learned into the next strategic planning cycle.

(Eighth meeting, 29 September 2005)

THE 46th DIRECTING COUNCIL,

Having considered the Final Report of the 136th Session of the Executive Committee (Document CE136/FR);

Having examined the Proposed Program Budget of the Pan American Health Organization for the financial period 2006-2007 contained in Official Document 317;

Noting the significant mandatory cost increase in posts for 2006-2007, due primarily to currency adjustments in the international financial market with respect to the United States dollar, despite an unprecedented proposed reduction in the Secretariat’s work force;

Mindful of the initiative of the Director to establish a priority-driven program budget process and to respond to the comments and recommendations received from Member States after the 136th Session of the Executive Committee;

Noting the efforts of the Director to propose a program budget that takes into account both the economic concerns of Member States and the Organization’s public health mandates;

Mindful of the impact that the timely payment of assessments has on the Organization’s ability to plan for and deliver appropriately funded programs; and

Bearing in mind Article 14.C of the Constitution of the Pan American Health Organization and Article III, paragraphs 3.5 and 3.6, of the PAHO Financial Regulations,

RESOLVES:

1. To thank the Executive Committee for its preliminary review of and report on the proposed program budget.

2. To express appreciation to the Director for the attention given to cost savings and priority setting in the development of the program budget.

3. To approve the Program of Work for the Secretariat with a zero increase in net assessments as outlined in the proposed Biennial Program Budget 2006-2007, Official Document 317, recognizing that this is not intended to signal a sustained zero growth policy for future program budget exercises presented to the Directing Council.
4. To encourage all countries to make voluntary contributions to support priorities as identified in the 2% scenario contained in *Official Document 317*, and ask the Secretariat to report on these efforts.

5. To encourage countries to pay their arrears and to provide timely payments of their assessments.

6. To appropriate an amount of $288,781,638 for the financial period 2006-2007, as follows:

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<thead>
<tr>
<th>SECTIO N</th>
<th>TITLE</th>
<th>AMOUNT</th>
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<tbody>
<tr>
<td>1</td>
<td>Communicable Diseases</td>
<td>24,346,900</td>
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<tr>
<td>2</td>
<td>Noncommunicable Diseases and Reduction of Risk Factors</td>
<td>17,165,100</td>
</tr>
<tr>
<td>3</td>
<td>Sustainable Development and Environmental Health</td>
<td>30,236,800</td>
</tr>
<tr>
<td>4</td>
<td>Family and Community Health</td>
<td>15,759,700</td>
</tr>
<tr>
<td>5</td>
<td>Health Technologies</td>
<td>5,610,800</td>
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<tr>
<td>6</td>
<td>Health Systems Development</td>
<td>47,787,100</td>
</tr>
<tr>
<td>7</td>
<td>Knowledge Management and Information Technology</td>
<td>19,072,100</td>
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<tr>
<td>8</td>
<td>Managerial and Administrative Processes</td>
<td>49,260,900</td>
</tr>
<tr>
<td>9</td>
<td>Core Presence in Countries</td>
<td>46,378,600</td>
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<tr>
<td>10</td>
<td>Country Variable</td>
<td>4,950,000</td>
</tr>
<tr>
<td>11</td>
<td>Retirees’ Health Insurance</td>
<td>5,000,000</td>
</tr>
<tr>
<td></td>
<td><strong>Effective Working Budget for 2006-2007 (Parts 1-11)</strong></td>
<td><strong>265,568,000</strong></td>
</tr>
<tr>
<td>12</td>
<td>Staff Assessment (Transfer to Tax Equalization Fund)</td>
<td>23,213,638</td>
</tr>
</tbody>
</table>

**Total – All Sections** 288,781,638

7. That the appropriation shall be financed from:

(a) Assessments in respect to:

Member Governments, Participating Governments, and Associate Members assessed under the scale adopted by the Organization of American States in accordance with Article 60 of the Pan American Sanitary Code or in accordance with Directing Council and Pan American Sanitary Conference resolutions 196,513,638

(b) Miscellaneous Income ................................................................. 14,500,000

(c) AMR share approved in Resolution WHA58.4 ................................. 77,768,000

**TOTAL** 288,781,638
8. In establishing the contributions of Member Governments, Participating Governments, and Associate Members, their assessments shall be reduced further by the amount standing to their credit in the Tax Equalization Fund, except that credits of those which levy taxes on the emoluments received from the Pan American Sanitary Bureau (PASB) by their nationals and residents shall be reduced by the amounts of such tax reimbursements by PASB.

9. That, in accordance with the Financial Regulations of PAHO, amounts not exceeding the appropriations noted under paragraph 4 shall be available for the payment of obligations incurred during the period 1 January 2006 to 31 December 2007, inclusive. Notwithstanding the provision of this paragraph, obligations during the financial period 2006-2007 shall be limited to the effective working budget, i.e., Sections 1-11.

10. That the Director shall be authorized to transfer credits between the programmatic sections 1-9 of the effective working budget, provided that such transfer of credits between sections does not exceed 10% of the section from which the credit is transferred, exclusive of the provision made for transfers from the Regional Director's Development Program in Section 8. Except for the provision made for the Regional Director's Development Program in Section 8, transfers of credits between sections of the budget in excess of 10% of the section from which the credit is transferred may be made with the concurrence of the Executive Committee. The Director is authorized to apply amounts not exceeding the provision for the Director's Development Program to those sections of the effective working budget under which the program obligation will be incurred. All transfers of budget credits shall be reported to the Directing Council or the Pan American Sanitary Conference.

11. Expenditure in Section 10 will be made in accordance with the criteria approved by the 39th Subcommittee on Planning and Programming, and as presented to the 46th Directing Council in Official Document 317. Expenditure from Section 10 will be added to the corresponding programmatic appropriation section at the time of reporting.

12. Expenditure in Section 11 is a statutory expenditure and will be apportioned proportionately across appropriation sections 1-9 at the time of reporting.

(Eighth meeting, 29 September 2005)
THE 46th DIRECTING COUNCIL,

Whereas, Member Governments appearing in 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; and

Whereas, adjustments were made taking into account the assessments of Cuba, the Participating Governments, and Associate Members; now, therefore,

RESOLVES:

To establish the assessments of the Member Governments, Participating Governments, and Associate Members of the Pan American Health Organization for the financial period 2006-2007 in accordance with the scale of quotas shown below and in the corresponding amounts.

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<tbody>
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<td>Bahamas</td>
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<td>68,723</td>
<td>8,093</td>
<td>8,093</td>
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### Member Governments:

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### Adjustment for Taxes Imposed by Member Governments on Emoluments of PASB Staff

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<th>Gross Assessment</th>
<th>Credit from Equalization Fund</th>
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(5) This column includes estimated amounts to be received by the respective Member Governments in 2006-2007 in respect of taxes levied by them on staff members' emoluments received from PASB, adjusted for the difference between the estimated and the actual for prior years.

\[(Eighth\:meeting,\:29\:September\:2005)\]

**CD46.10 Amendment to the Staff Regulations of the Pan American Sanitary Bureau**

**THE 46th 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 136th Session;

Having considered the recommendation of the Executive Committee regarding Staff Regulations 1.13 and 1.15; and

Bearing in mind the provisions of Staff Regulation 12.1,
RESOLVES:

To approve the amendments to Staff Regulations 1.13 and 1.15 with respect to dispute resolution mechanisms available to national employees of the Organization, effective 1 July 2005.

(Ninth meeting, 30 September 2005)

CD46.R11  Salary of the Director of the Pan American Sanitary Bureau

THE 46th DIRECTING COUNCIL,

Taking into account the decision by the Executive Committee at its 136th Session to adjust the salaries of the Deputy Director and Assistant Director (Resolution CE136/22, Rev.1);

Having noted the recommendation of the Executive Committee concerning the salary of the Director of the Pan American Sanitary Bureau (Resolution CE136/22, Rev.1); and

Bearing in mind the provisions of Staff Rule 330.4,

RESOLVES:

To establish the annual net salary of the Director of the Pan American Sanitary Bureau at US$ 127,970 at the dependency rate and US$ 115,166 at the single rate, effective 1 January 2005.

(Ninth meeting, 30 September 2005)


THE 46th DIRECTING COUNCIL,

Recognizing that, although preventable and curable, tuberculosis remains an important public health problem in the Americas, as each year it is responsible for more than 230,000 cases and 53,000 deaths;
Considering the diverse epidemiological situation of the Member States, as well as the different characteristics of their health systems and the development levels of their national tuberculosis programs;

Mindful that tuberculosis control faces challenges such as TB/HIV coinfection, multidrug-resistant tuberculosis, and health sector reform;

Considering that the internationally recognized strategy for tuberculosis control is “directly observed treatment, short course” (DOTS), which attained coverage of 78% of the population of the Americas in 2003 and is making great strides in the detection and management of tuberculosis cases;

Considering the need to step up efforts to meet the indicators and goals for tuberculosis set by the World Health Organization’s Stop TB Initiative, as well as those within the framework of the Development Goals contained in the Millennium Declaration set for the year 2015; and

Recognizing World Health Assembly Resolution WHA58.14 “Sustainable Financing for Tuberculosis Prevention and Control,”

RESOLVES:

1. To urge the Member States to:

(a) confirm tuberculosis control as a priority health program and expand, improve, or maintain implementation of the DOTS strategy;

(b) consider the Regional Plan when formulating national plans, with the objectives of consolidating gains and attaining the goals set for 2015 in the Millennium Declaration;

(c) strengthen health systems to implement and reinforce strategies for the prevention and control of multidrug-resistant tuberculosis, including DOTS-Plus, to improve collaboration between tuberculosis and HIV/AIDS programs;

(d) promote advocacy, communication, and social participation in national tuberculosis plans, fostering collaboration between the public and private sectors, civil society, the people affected, United Nations agencies, and other interested stakeholders, and forming national Stop TB committees in order to maintain and increase support for national tuberculosis programs;
allocate the necessary financial and human resources for tuberculosis control so that tuberculosis patients have access to the universal standard of care based on proper diagnosis, treatment and reporting, consistent with the new DOTS strategy.

2. To request the Director to:

(a) consolidate and strengthen PAHO’s commitment to supporting the expansion and sustainability of the new DOTS strategy in the Region;

(b) cooperate technically with the countries to tackle the new challenges posed by tuberculosis;

(c) encourage partnerships with the public and private sectors and technical and financial agencies that work in tuberculosis control to support the Stop-TB Partnership in the Americas;

(d) improve the formulation and implementation of comprehensive public health strategies for tuberculosis control through resource allocation, sharing of experiences, and development of evaluative tools;

(e) periodically evaluate and report to the Directing Council on the progress made toward achieving Goal 6 of the United Nations Millennium Declaration, especially in the area of tuberculosis control.

(Ninth meeting, 30 September 2005)

CD46.R13 Malaria and the Internationally Agreed-Upon Development Goals, Including Those Contained in the Millennium Declaration

THE 46th DIRECTING COUNCIL,

Having considered Document CD46/17 on malaria, which proposes that the Member States continue efforts to combat malaria through strengthening national capacity at all service levels to preserve achievements and further reduce the burden of the disease where it continues to be a public health problem;

Taking into account that the 42nd Directing Council urged Member States to adopt the Roll Back Malaria Initiative in territories where malaria still constitutes a public health problem and to make a commitment to perform an annual evaluation on
progress in the different areas of the initiative until malaria is eliminated as a public health problem in the Region;

Concerned that the disease continues to be a public health problem in a number of territories and that there is need for sustained efforts to attain the Roll Back Malaria Initiative and the Millennium Declaration Goals of 2010 and 2015, respectively;

Recognizing the potential for increased financial support to countries for malaria control from the Global Fund to Fight AIDS, Tuberculosis, and Malaria; and concerned that the eligibility criteria of the Fund exclude many countries in the Region from the possibility of having access to future grants; and

Noting the Report on Malaria presented by the WHO Secretariat to the Fifty-eighth World Health Assembly and Resolution WHA58.2 on “Malaria Control,”

RESOLVES:

1. To urge Member States to:

(a) establish national policies and operational plans to ensure accessibility to prevention and control interventions for those at risk or affected by malaria in order to achieve a reduction of the malaria burden by at least 50% by 2010 and 75% by 2015;

(b) perform annual evaluations on the national progress of the Roll Back Malaria Initiative;

(c) allocate domestic resources, mobilize additional resources, and effectively utilize them in the implementation of appropriate malaria prevention and control interventions, and commit to perform regular assessments on their progress;

(d) take into account the need to include those trained in malaria, when assessing the staffing needs of the health systems, and take measures to ensure the recruitment, training, and retention of health personnel;

(e) encourage communication, coordination, and collaboration between malaria control units and other technical units and institutions, including nongovernmental organizations, the private sector, and universities; and to strengthen intercountry collaboration to reduce the burden and prevent the spread of malaria across borders;
(f) implement integrated approaches to malaria prevention and control through multisectoral collaboration and co-responsible community participation;

(g) aim at reducing transmission risk factors through integrated vector management; promote improvement of local and environmental conditions and healthy settings; and increase access to health services in order to reduce disease burden;

(h) advocate in a coordinated fashion through their representatives on the Board of Directors of the Global Fund to Fight AIDS, Tuberculosis, and Malaria and through other high-level diplomatic channels, including the Summit of the Americas, for equity of countries and partners from the Region in accessing Global Fund resources;

(i) designate a “Malaria Control Day in the Americas” on a selected annual date, to recognize past and current efforts to prevent and control malaria, promote awareness, and monitor progress;

(j) foster and support research to develop vaccines, new insecticides, and more effective drugs to fight malaria.

2. To request the Director to:

(a) continue providing technical cooperation and coordinating efforts to reduce malaria in endemic countries and to prevent reintroduction of transmission where this has been achieved;

(b) develop and support mechanisms for monitoring the progress of malaria prevention and control and report on a regular basis;

(c) assist Member States, as appropriate, to develop and implement effective and efficient mechanisms for resource mobilization and utilization;

(d) initiate and support subregional and intercountry initiatives aimed at prevention and control of malaria among mobile populations, as well as in areas of common epidemiologic interest, particularly those in border areas;

(e) assist Member States, as appropriate, in the implementation of projects financed by the Global Fund to Fight AIDS, Tuberculosis, and Malaria;

(f) foster and support research to develop vaccines, new insecticides, and more effective drugs to fight malaria.

(Ninth meeting, 30 September 2005)
CD46.R14  Hurricanes Katrina and Rita and Disaster Preparedness in the Region of the Americas

THE 46th DIRECTING COUNCIL,

Regretting the profound devastation caused by hurricanes Katrina and Rita and the severe human toll on the population of the southern states of Louisiana, Mississippi, Texas, and Alabama of the United States of America, as well as the impact that these and other natural disasters have had on the Region in past months;

Taking into account that, despite the best efforts of Member States to reduce the impact of disasters on the health and well-being of their populations and to improve disaster preparedness, natural disasters continue to have a negative impact on the health of the peoples, on the health infrastructure, and on the social and economic development of Member States; and

Conscious of the many expressions of solidarity from countries in this Hemisphere and of the cooperation made available by the United Nations and inter-American systems, including the World Health Organization (WHO) and the Pan American Health Organization (PAHO), while at the same time acknowledging that the affected areas themselves are most often the first to assist the disaster-affected populations,

RESOLVES:

1. To express sincere condolences to and solidarity with the United States of America for the losses suffered from hurricanes Katrina and Rita as well as with those countries that also suffered losses due to recent hurricanes and other natural disasters.

2. To urge Member States to continue giving priority attention to the allocation of financial resources intended to reduce the vulnerability of their populations and health facilities and to strengthen preparedness and response mechanisms for major emergencies.

3. To request the Director of PAHO to further support Member States by establishing a regionwide mechanism for immediate disaster response.

4. To request the Director of PAHO to present a report to the 47th Directing Council regarding advances made on the above.

(Ninth meeting, 30 September 2005)

THE 46th DIRECTING COUNCIL,

Cognizant that every day over 400 people die from AIDS in the Americas, of whom 353 are from Latin America and the Caribbean, and that there are no signs that the overall prevalence of HIV is diminishing;

Concerned that Central America and the Caribbean are particularly affected by the epidemic;

Aware that HIV/AIDS is a serious problem affecting the development of the Region, and posing a serious threat to the realization of regional and global goals, including Goal 6 of the United Nations Millennium Declaration;

Bearing in mind that while considerable progress has been made in access to care and treatment—the Region having met the goal of the Special Summit of the Americas held in Nuevo Leon, Mexico, in 2004, of treating at least 600,000 persons by November 2005—there are still major inequities within and between countries in terms of access to comprehensive care;

Emphasizing that revitalized prevention efforts, using evidence-based interventions, are urgently required if Goal 6 of the United Nations Millennium Declaration, of reducing and reversing the spread of HIV/AIDS by 2015 is to be met in the Region; and

Further recognizing that to have a decisive impact on the HIV epidemic, and to take advantage of the diversity of experiences of countries in scaling-up care and treatment that can be shared among them, a Regional Strategic Plan for HIV/AIDS/STI, 2006-2015, is urgently required, with a long-term vision including targets and milestones at regional, subregional, and country levels,

RESOLVES:

1. To approve the Framework of the Regional Strategic Plan for HIV/AIDS/STI, 2006-2015, designed to halt and begin to reverse the spread of HIV/AIDS and STIs in the Region by 2015, and in doing so, develop and implement a package for HIV prevention, treatment, and care with the aim of being as close as possible to the goal of universal access to treatment by 2010 for all those who need it.
2. To encourage PAHO to work with countries to finalize the Regional Strategic Plan as quickly as possible, in accordance with the strategic lines of action outlined in the Framework.

3. To give political support to the Regional Strategic Plan and to assign resources at the national level for its implementation and for ongoing monitoring and evaluation, as well as to provide cooperation with other countries to share positive experiences and lessons learned.

4. To encourage all partners and agencies to join forces to intensify efforts to achieve the Three Ones at the regional level and within Member States.

(Ninth meeting, 30 September 2005)

CD46.R16 PAHO Gender Equality Policy

THE 46th DIRECTING COUNCIL,

Having considered Document CD46/12 on implementing a PAHO Gender Equality Policy;

Taking into account the persistence of gender inequalities in health and development in the Hemisphere;

Recalling the Beijing Declaration (1995), the recommendations of Beijing Plus 10 (2005), the Millennium Declaration of the United Nations (2000), and the 2002 WHO Gender Policy;

Aware of the existence of internationally accepted evidence that indicate the incorporation of the criteria of gender equality in health policies and programs respond to the principles of efficacy and efficiency in the practice of public health;

Aware of the ongoing work of WHO in the development of a Gender Strategy and Gender Plan of Action;

Acknowledging the debate on a WHO Gender Equality Policy and recognizing the adoption and implementation of gender equality policies in Member States, the United Nations system, and the inter-American system; and

Noting the need to take all appropriate measures to prevent the trafficking of people (women and girls) in the Region, and eliminate the demand for them; and
acknowledging that poverty and gender inequity are root factors that encourage trafficking, especially of women and girls,

RESOLVES:

1. To adopt the PAHO Gender Equality Policy.

2. To urge the Member States to:

   (a) implement the Gender Equality Policy, in collaboration with relevant government sectors, the United Nations system, the inter-American system, and the civil society stakeholders;

   (b) generate and analyze data disaggregated by sex and other relevant variables;

   (c) include, as appropriate, in the National Health Accounts indicators for the unremunerated time devoted by men and women to health care in the home, as a function of the total expenditure of the health care system;

   (d) incorporate a gender equality perspective, as appropriate, in the development, monitoring, and evaluation of policies and programs, as well as on research and training activities;

   (e) strive for parity between the sexes in matters of recruitment and career development, including employment in decision-making positions;

   (f) promote and support the active participation of men and boys in programs aimed at achieving gender equality in health.

3. To request the Director, within the available financial means, as mandated within the various processes of institutional strengthening, to:

   (a) develop an action plan for the implementation of the Gender Equality Policy, including a performance monitoring and accountability system;

   (b) give priority to data generation and analysis, disaggregated by sex and other relevant variables;

   (c) mainstream the gender approach into the policies and programs of the Organization, including research and training activities;

   (d) develop training materials and programs that promote gender equality;
(e) support efforts by Member States and civil society to monitor the impact of health policies and programs on gender equality, as well as their impact on the reduction of maternal mortality and gender-based violence;

(f) strive for parity between the sexes in matters of recruitment, career development, and employment in decision-making positions within the Secretariat;

(g) include gender equality in the different political and managerial fora held by the Organization at the regional, subregional, and national levels;

(Ninth meeting, 30 September 2005)

Decisions

CD46(D1): Committee on Credentials

Three delegates, from Bolivia, Dominica, and France, respectively, were appointed members of the Committee on Credentials.

(First meeting, 26 September 2005)

CD46(D2): Officers

Uruguay (Dr. María Julia Muñoz) was elected to the Presidency, El Salvador (Dr. José Guillermo Maza Brizuela) and Saint Lucia (Hon. Damian Greaves) to the Vice Presidencies, and Puerto Rico (Dr. Aída González de Gregory) to the office of Rapporteur.

(First meeting, 26 September 2005)


Three delegates, from Canada, Guatemala, and Saint Vincent and the Grenadines, respectively, were elected members of the Working Party.

(First meeting, 26 September 2005)
**CD46(D4): General Committee**

Three delegates, from Brazil, Cuba, and the United States of America, respectively, were elected members of the General Committee.

*(First meeting, 26 September 2005)*

**CD46(D5): Agenda**

Pursuant to Rule 10 of the Rules of Procedure, the Directing Council adopted the provisional agenda, (Document CD46/1) presented by the Director.

*(First meeting, 26 September 2005)*

**CD46(D6): Annual Report of the Director of the Pan American Sanitary Bureau**


*(Second meeting, 26 September 2005)*

**CD46(D7): 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 2004 and September 2005.

*(Second meeting, 26 September 2005)*


*(Sixth meeting, 28 September 2005)*
IN WITNESS WHEREOF, the President of the 46th Directing Council, Delegate of Uruguay, 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 thirtieth day of September in the year two thousand and five. 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.

__________________________
María Julia Muñoz
President of the 46th Directing Council
Delegate of Uruguay

__________________________
Mirta Roses Periago
Secretary ex officio of the 46th Directing Council
Director of the Pan American Sanitary
AGENDA

1. Opening of the Session

2. Invited Speaker

3. Procedural 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 Dominica, Paraguay, and the United States of America

4. Program Policy Matters
   4.2 Guiding Principles for Strategic Resources Allocations across WHO
   4.3 WHO's Eleventh General Program of Work
   4.5 Technical Cooperation among Countries in the Region
   4.6 Strategy for the Future of the Pan American Centers
   4.7 Proposed PAHO Gender Policy
4. Program Policy Matters (cont.)

4.8 Regional Declaration on the New Orientations for Primary Health Care

4.9 Report of the 14th Inter-American Meeting, at the Ministerial Level, on Health and Agriculture

4.10 Update on the Process of Institutional Strengthening within the Pan American Sanitary Bureau


4.12 Malaria and the Internationally Agreed-upon Development Goals, Including Those Contained in the Millennium Declaration

4.13 Regional Strategy for the Control of Tuberculosis for 2005-2015

4.14 Country-Focused Cooperation and National Health Development

4.15 Access to Care for People Living with HIV/AIDS

4.16 Progress Report on Family and Health

5. Administrative and Financial Matters

5.1 Report on the Collection of Quota Contributions

5.2 Interim Financial Report of the Director, 2004

5.3 Report of the Joint Inspection Unit (deferred from CE136)

5.4 Report on the Activities of the Internal Oversight Services

5.5 PAHO Financial Rules
5. **Administrative and Financial Matters** (*cont.*)

5.6 Appointment of the External Auditor

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

5.8 2004-2005 External Audit Report to the Directing Council

6. **Committee Matters**


6.2 PAHO in the 21st Century: Final Report

7. **Awards**

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7.2 Abraham Horwitz Award for Inter-American Health, 2005

7.3 Manuel Velasco-Suárez Award in Bioethics, 2005

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9. **Other Matters**
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Official Documents


Working Documents

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CD46/3 and Corrig. Annual Report of the President of the Executive Committee

CD46/4 Annual Report of the Director of the Pan American Sanitary Bureau

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CD46/6 Guiding Principles for Strategic Resources Allocations across WHO

CD46/7 WHO’s Eleventh General Program of Work


CD46/9 Technical Cooperation among Countries in the Region

CD46/10 Strategy for the Future of the Pan American Centers

Working Documents (cont.)

CD46/12   Proposed PAHO Gender Policy

CD46/13   Regional Declaration on the New Orientations for Primary Health Care

CD46/14   Report of the 14th Inter-American Meeting, at the Ministerial Level, on Health and Agriculture

CD46/15, Rev. 1   Update on the Process of Institutional Strengthening within the Pan American Sanitary Bureau


CD46/17   Malaria and the Internationally Agreed-upon Development Goals, Including Those Contained in the Millennium Declaration

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CD46/34    Interim Financial Report of the Director, 2004

CD46/35    2004-2005 External Audit Report to the Directing Council

Information Documents


CD46/INF/2    AHO Biennial Program Budget 2006-2007: Scope of the Areas of Work

CD46/INF/3, Rev. 1    Actions Taken in 2004-2005 to Strengthen the Pan American Sanitary Bureau, in Accordance with the Strategic Plan 2003-2007

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LIST OF PARTICIPANTS
LISTA DE PARTICIPANTES

Member States/Estados Miembros

Antigua and Barbuda/Antigua y Barbuda

Chief Delegate – Jefe de Delegación

Hon. H. John Maginley
Minister of Health, Sports, and Youth Affairs
Ministry of Health, Sports, and Youth Affairs
St. John's

Delegates – Delegados

Ms. Rhonda Sealey-Thomas
Acting Chief Medical Officer
Ministry of Health, Sports, and Youth Affairs
St. John's

Ms. Ann-Marie Layne Campbell
First Secretary
Embassy of Antigua and Barbuda
Washington, D.C.

Argentina

Chief Delegate – Jefe de Delegación

Dr. Ginés González García
Ministro de Salud y Ambiente de la Nación
Ministerio de Salud y Ambiente de la Nación
Buenos Aires
Member States/Estados Miembros (cont.)

Argentina (cont.)

Delegates – Delegados

Dr. Héctor Conti
Subsecretario de Programas Sanitarios
Subsecretaría de Relaciones Sanitarias
e Investigación en Salud
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Dr. Carlos Vizzotti
Subsecretario de Relaciones Sanitarias
e Investigación en Salud
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Alternates – Alternos

Dr. Ismael Passaglia
Ministro de Salud de la Provincia
de Buenos Aires
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Dr. David dos Santos
Ministro de Salud Pública de la Provincia
de Corrientes
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Advisers – Asesores

Dr. Lisandro Bonelli
Asesor del Ministro de Salud
y Ambiente de la Nación
Ministerio de Salud y Ambiente de la Nación
Buenos Aires
Argentina (cont.)

Advisers – Asesores (cont.)

Dra. Silvina Ramos
Asesora del Ministro de Salud
y Ambiente de la Nación
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Lic. Karina Chierzi
Jefa de Gabinete de la Subsecretaria de Relaciones
Sanitarias e Investigación en Salud
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

Bahamas

Chief Delegate – Jefe de Delegación

Hon. Senator Marcus C. Bethel
Minister of Health
Ministry of Health
Nassau

Delegates – Delegados

Dr. Mercelene Dahl-Regis
Chief Medical Officer
Ministry of Health
Nassau

Dr. Baldwin Carey
Director of Public Health
Ministry of Health
Nassau
Member States/Estados Miembros (cont.)

Bahamas (cont.)

Alternate – Alterno

Dr. Pearle MacMillan
Senior House Officer
Planning Unit
Ministry of Health
Nassau

Barbados

Chief Delegate – Jefe de Delegación

Hon. Jerome X. Walcott
Minister of Health
Ministry of Health
St. Michael

Delegates – Delegados

Ms. Antoinette Williams
Permanent Secretary
Ministry of Health
St. Michael

Dr. Joy St. John
Chief Medical Officer
Ministry of Health
St. Michael

Belize/Belice

Chief Delegate – Jefe de Delegación

Ms. Lisa M. Shoman
Ambassador
Permanent Representative of Belice
to the Organization of American States
Washington, D.C.
Member States/Estados Miembros (cont.)

Bolivia

Chief Delegate – Jefe de Delegación

Dr. Álvaro Muñoz Reyes Navarro
Ministro de Salud y Deportes
Ministerio de Salud y Deportes
La Paz

Brazil/Brasil

Chief Delegate – Jefe de Delegación

Dr. Francisco Eduardo de Campos
Secretário de Gestão do Trabalho
e da Educação na Saúde
Ministério da Saúde
Brasília

Delegates – Delegados

Dr. Jarbas Barbosa da Silva Júnior
Secretário de Vigilância em Saúde
Ministério da Saúde
Brasília

Sr. Santiago Luís Bento Fernandez Alcázar
Conselheiro
Assessor Especial do Ministro da Saúde
Ministério da Saúde
Brasília

Alternates – Alternos

Dr. Sérgio Gaudêncio
Chefe da Divisão de Temas Multilaterais
Ministério da Saúde
Brasília
Member States/Estados Miembros (cont.)

Brazil/Brasil (cont.)

Alternates – Alternos (cont.)

Dr. Sérgio Gaudêncio
Chefe da Divisão de Temas Multilaterais
Ministério da Saúde
Brasília

Sr. Osmar Chohfi
Embaçador do Brasil na
Organização dos Estados Americanos
Washington, D.C.

Sra. Camile Filippozzi
Representante Alterna do Brasil na
Organização dos Estados Americanos
Washington, D.C.

Sr. Fernando Simas
Representante Alterno do Brasil na
Organização dos Estados Americanos
Washington, D.C.

Canada/Canadá

Chief Delegate – Jefe de Delegación

Mr. Morris Rosenberg
Deputy Minister of Health
Ministry of Health
Ottawa

Delegates – Delegados

Ms. Carla Penn Gilders
Director General
International Affairs Directorate
Health Canada
Ottawa
Member States/Estados Miembros (cont.)

Canada/Canadá (cont.)

Delegates – Delegados (cont.)

Mr. Nick Previsich
Acting Director
International Affairs Directorate
Health Canada
Ottawa

Alternates – Alternos

Ms. Melissa Follen
Senior Policy Advisor
International Affairs Directorate
Health Canada
Ottawa

Ms. Lyne Gaudreau
Program Coordinator
International Affairs Directorate
Health Canada
Ottawa

Ms. Hélène Valentini
Responsible for International Cooperation
Institut National de Santé publique du Québec
Québec

Dr. Eleftherios C. Vamvakas
Executive Vice President
Medical, Scientific, and Research Affairs
Canadian Blood Services
Ottawa

Dr. Geraldine Osborne
Chief Medical Officer of Health
Department of Health and Social Services
Government of Nurabut
Nurabut
Member States/Estados Miembros (cont.)

Canada/Canadá (cont.)

Alternates – Alternos (cont.)

Mr. Jim Ball
Director
Development and Partnership Division
Public Health Agency of Canada
Ottawa

Dr. Amrita Paul
Health Specialist
Canadian International Development Agency
Ottawa

Ms. Basia Manitius
Alternate Representative
Permanent Mission of Canada to the
Organization of American States
Washington, D.C.

Chile

Chief Delegate – Jefe de Delegación

Dr. Pedro García
Ministro de Salud
Ministerio de Salud
Santiago

Delegates – Delegados

Dr. Manuel Inostroza
Superintendente Provisional de Instituciones de Salud
Ministerio de Salud
Santiago
Member States/Estados Miembros (cont.)

Chile (cont.)

Delegates – Delegados (cont.)

Dr. Roberto Tapia  
Jefe de la Oficina de Cooperación y Asuntos Internacionales  
Ministerio de Salud  
Santiago

Alternate – Alterno

Sra. Natalia Meta Buscaglia  
Coordinadora de Proyectos  
Oficina de Cooperación y Asuntos Internacionales  
Ministerio de Salud  
Santiago

Colombia

Chief Delegate – Jefe de Delegación

Sr. Juan Rodrigo López Escudero  
Consejero, Representante Alterno de Colombia ante la Organización de los Estados Americanos  
Washington, D.C.

Costa Rica

Chief Delegate – Jefe de Delegación

Dra. María del Rocío Sáenz Madrigal  
Ministra de Salud  
Ministerio de Salud  
San José
**Costa Rica** (cont.)

Delegate – Delegado

Sra. Roxana Terán-Victory
Ministra Consejera
Misión Permanente de Costa Rica ante la
Organización de los Estados Americanos
Washington, D.C.

**Cuba**

Chief Delegate – Jefe de Delegación

Dr. Antonio D. González Fernández
Jefe del Departamento de Organismos Internacionales
Ministerio de Salud Pública
La Habana

Delegates – Delegados

Sr. Dagoberto Rodríguez Barrera
Jefe de la Sección de Intereses
Washington, D.C.

Sra. Marisabel de Miguel
Segunda Secretaria
Sección de Intereses
Washington, D.C.

**Dominica**

Chief Delegate – Jefe de Delegación

Hon. John Fabien
Minister of Health and Social Security
Ministry of Health and Social Security
Roseau
Dominican Republic/República Dominicana

Chief Delegate – Jefe de Delegación

Dr. Bautista Rojas Gómez
Secretario de Estado de Salud Pública
y Asistencia Social
Secretaría de Salud Pública
y Asistencia Social
Santo Domingo

Delegates – Delegados

Sr. Pedro Ventura
Director de Procedimientos y Gestión
de Tecnología
Secretaría de Salud Pública
y Asistencia Social
Santo Domingo

Dra. Tirsis Quezada
Asistente del Despacho
Secretaría de Salud Pública
y Asistencia Social
Santo Domingo

Alternate – Alterno

Sr. Pedro J. Zaiter
Consejero
Misión Permanente de la República Dominicana
ante la Organización de los Estados Americanos
Washington, D.C.
Member States/Estados Miembros (cont.)

Ecuador

Chief Delegate – Jefe de Delegación

Dr. Wellington Sandoval Córdoba
Ministro de Salud Pública
Ministerio de Salud Pública
Quito

Delegates – Delegados

Dr. Ramiro Echeverría
Director General de Salud
Ministerio de Salud Pública
Quito

Dr. Asdrúbal de la Torre
Director Ejecutivo
Consejo Nacional de Salud
Quito

Alternates – Alternos

Dra. Tatiana Neira
Directora de Relaciones Internacionales
Ministerio de Salud Pública
Quito

Dr. Augusto Maldonado
Coordinador Proyecto MODERSA
Ministerio de Salud Pública
Quito
El Salvador

Chief Delegate – Jefe de Delegación

Dr. Guillermo Maza
Ministro de Salud Pública y Asistencia Social
Ministerio de Salud Pública y
Asistencia Social
San Salvador

Delegate – Delegado

Dr. Humberto Alcides Urbina
Director General de Salud
Ministerio de Salud Pública y
Asistencia Social
San Salvador

Alternate – Alterno

Lic. Flavio Villacorta
Ministro Consejero
Representación Permanente de El Salvador ante la
Organización de los Estados Americanos
Washington, D.C.

France/Francia

Chief Delegate – Jefe de Delegación

M. Georges Vaugier
Ambassadeur, Observateur permanent de la France
près l’Organisation des États Américains
Washington, D.C.
**Member States/Estados Miembros** (cont.)

**France/ Francia** (cont.)

Delegates – Delegados

Professeur Jacques Drucker  
Conseiller santé près l’Ambassade de France  
aux États-Unis  
Washington, D.C.

M. Raymond Quereilhac  
Conseiller, Représentation permanente de la France  
près l’Organisation des États Américains  
Washington, D.C.

Alternates – Alternos

Dr Henriette Chamouillet  
Conseillère regionale santé pour les Caraïbes  
Bridgetown

M. Patrice Richard  
Directeur de la santé et du développement social  
Ministère de la santé  
Région Guadeloupe

**Grenada/Granada**

Chief Delegate – Jefe de Delegación

Hon. Senator Ann David Antoine  
Minister of Health, Social Security, the Environment,  
and Ecclesiastical Affairs  
Ministry of Health, Social Security, the Environment,  
and Ecclesiastical Affairs  
St. George's
Member States/Estados Miembros (cont.)

Grenada/Granada (cont.)

Delegate – Delegado

Ms. Patricia Clarke
Counselor
Permanent Mission of Grenada
to the Organization of American States
Washington, D.C.

Guatemala

Chief Delegate – Jefe de Delegación

Ing. Marco Tulio Sosa
Ministro de Salud Pública
y Asistencia Social
Ministerio de Salud Pública
y Asistencia Social
Ciudad de Guatemala

Delegates – Delegados

Lic. Cristina Ramírez
Asesora del Programa de Mejoramiento
de los Servicios de Salud
Ministerio de Salud Pública
y Asistencia Social
Ciudad de Guatemala

Lic. Alfredo Privado
Asesor del Programa de Mejoramiento
de los Servicios de Salud
Ministerio de Salud Pública
y Asistencia Social
Ciudad de Guatemala
Guatemala (cont.)

Alternates – Alternos

Lic. Claudia de Rocco
Asesora Ministerial
Ministerio de Salud Pública
y Asistencia Social
Ciudad de Guatemala

Dr. Francisco Villagrán de León
Embajador
Representante Permanente de Guatemala
ante la Organización de los Estados Americanos
Washington, D.C.

Guyana

Chief Delegate – Jefe de Delegación

Hon. Dr. Leslie Ramsammy
Minister of Health
Ministry of Health
Georgetown

Haiti/Haiti

Chief Delegate – Jefe de Delegación

Dr Josette Bijou
Ministre de la Santé publique
et de la Population
Ministère de la Santé publique
et de la Population
Port-au-Prince
Member States/Estados Miembros (cont.)

Haiti/Haïti (cont.)

Delegates – Delegados

Dr Michael Leändre
Directeur général
Ministère de la Santé publique
et de la Population
Port-au-Prince

Mme Suze Percy Filippini
Ministre Conseillère
Mission permanente d'Haïti près
l'Organisation des États Américains
Washington, D.C.

Alternate – Alterno

M. Duly Brutus
Chargé d’Affaires
Mission permanente d'Haïti près
l'Organisation des États Américains
Washington, D.C.

Honduras

Chief Delegate – Jefe de Delegación

Sr. Salvador Rodezno Fuentes
Embajador
Representante Permanente de Honduras
ante la Organización de los Estados Americanos
Washington, D.C.
**Honduras (cont.)**

Delegates – Delegados

Lic. Guadalupe Carias  
Consejera  
Misión Permanente de Honduras ante la  
Organización de los Estados Americanos  
Washington, D.C.

Lic. Marcela Castañeda  
Primera Secretaria  
Misión Permanente de Honduras ante la  
Organización de los Estados Americanos  
Washington, D.C.

**Jamaica**

Chief Delegate – Jefe de Delegación

Hon. John A. Junor  
Minister of Health  
Ministry of Health  
Kingston

Delegates – Delegados

Dr. Barrington Wint  
Chief Medical Officer  
Ministry of Health  
Kingston

Ms. Pearline Cooper-Sharpe  
Chief Nursing Officer  
Ministry of Health  
Kingston
**Member States/Estados Miembros (cont.)**

**Mexico/México**

Chief Delegate – Jefe de Delegación

Dr. Julio Frenk Mora  
Secretario de Salud  
Secretaría de Salud  
México, D.F.

Delegates – Delegados

Dr. Roberto Tapia  
Subsecretario de Prevención y  
Promoción de la Salud  
Secretaría de Salud  
México, D.F.

Dr. Gabriel García Pérez  
Titular de la Unidad Coordinadora de Vinculación y Participación Social  
Secretaría de Salud  
México, D.F.

Alternates – Alternos

Lic. Mauricio Bailón González  
Director General  
Dirección General de Relaciones Internacionales  
Secretaría de Salud  
México, D.F.

Dr. Cuauhtémoc Ruiz Matus  
Coordinador de Asesores del Subsecretario de Prevención y Promoción de la Salud  
Secretaría de Salud  
México, D.F.
Member States/Estados Miembros (cont.)

Mexico/México (cont.)

Alternates – Alternos (cont.)

Lic. Nadia Levy Popp
Directora de Cooperación Bilateral
y Regional
Secretaría de Salud
México, D.F.

Lic. Juan Gabriel Morales
Representante Alterno de México ante la
Organización de los Estados Americanos
Washington, D.C.

Netherlands/Países Bajos

Chief Delegate – Jefe de Delegación

Dr. Joan P.E. Theodora-Brewster
Minister of Health and Social Development
Curaçao

Delegates – Delegados

Ms. Meroukshelaine Glas-Evans
Advisor to the Minister of Health
Curaçao

Dr. Henry Baarh
Minister Plenipotentiary for Aruban Affairs
Royal Netherlands Embassy
Washington, D.C.
Member States/Estados Miembros (cont.)

**Nicaragua**

Chief Delegate – Jefe de Delegación

Dr. Israel Kontorovsky  
Viceministro de Salud  
Ministerio de Salud  
Managua

Delegate – Delegado

Dr. Rodolfo Correa  
Coordinador del Proyecto de Modernización  
Ministerio de Salud  
Managua

**Panama/Panamá**

Chief Delegate – Jefe de Delegación

Dr. Camillo Alleyne  
Ministro de Salud  
Ministerio de Salud  
Ciudad de Panamá

Delegates – Delegados

Dr. Cirilo Lawson  
Director General de Salud  
Ministerio de Salud  
Ciudad de Panamá

Lic. Ilonka Pusztay  
Directora  
Asuntos Internacionales  
Ministerio de Salud  
Ciudad de Panamá
Member States/Estados Miembros (cont.)

Panama/Panamá (cont.)

Alternates – Alternos

Dr. Jorge Mota
Director
Instituto Conmemorativo Gorgas
de Estudios de Salud
Ciudad de Panamá

Sr. Jorge H. Miranda
Representante Alterno de Panamá ante la
Organización de los Estados Americanos
Washington, D.C.

Paraguay

Chief Delegate – Jefe de Delegación

Dr. Roberto E. Dullak Peña
Viceministro de Salud Pública y
Bienestar Social
Ministerio de Salud Pública y
Bienestar Social
Asunción

Delegates – Delegados

Ms. Sonia Quiroga
Primera Secretaría
Misión Permanente de Panamá ante la
Organización de los Estados Americanos
Washington, D.C.
Member States/Estados Miembros (cont.)

Peru/Perú

Chief Delegate – Jefe de Delegación

Dra. Pilar Mazzetti
Ministra de Salud
Ministerio de Salud
Lima

Delegates – Delegados

Dr. Carlos Cosentino
Director General de la Oficina General de Cooperación Internacional
Ministerio de Salud
Lima, Perú

Dr. Luis Manrique
Asesor del Despacho Ministerial
Ministerio de Salud
Lima, Perú

Alternate – Alterno

Sra. Ana Sánchez
Representante Alterno de Perú ante la Organización de los Estados Americanos
Washington, D.C.

Saint Lucia/ Santa Lucía

Chief Delegate – Jefe de Delegación

Hon. Damian Greaves
Minister of Health, Human Services, Family Affairs, and Gender Relations
Ministry of Health, Human Services, Family Affairs, and Gender Relations
Castries
Member States/Estados Miembros (cont.)

Saint Kitts and Nevis

Chief Delegate – Jefe de Delegación

Dr. Izben C. Williams
Ambassador
Permanent Representative of Saint Kitts and Nevis
to the Organization of American States
Washington, D.C.

Saint Vincent and The Grenadines/San Vicente y Las Granadinas

Chief Delegate – Jefe de Delegación

Mr. Ellsworth John
Ambassador
Permanent Representative of Saint Vincent and the
Grenadines to the Organization of American States
Washington, D.C.

Suriname

Chief Delegate – Jefe de Delegación

Hon. Dr. Celsius Waterberg
Minister of Health
Ministry of Health
Paramaribo

Delegate – Delegado

Dr. Marthelise Eersel
Acting Director of Health
Ministry of Health
Paramaribo
Member States/Estados Miembros (cont.)

Trinidad and Tobago/Trinidad y Tabago

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Dr. Rohit Doon
Chief Medical Officer
Ministry of Health
Port-of-Spain

Delegate – Delegado

Mr. Reynold Cooper
Acting Permanent Secretary
Ministry of Health
Port-of-Spain

United Kingdom

Chief Delegate – Jefe de Delegación

Mr. Anthony Kingham
Head of Global Health
Department of Health
London

Delegates – Delegados

Dr. Gabriel Scally
Regional Director of Public Health
Department of Health
London

Ms. Carolyn Sunners
Health Adviser
Department of Health
London
Member States/Estados Miembros (cont.)

United States of America/Estados Unidos de América

Chief Delegate – Jefe de Delegación

Hon. Michael O. Leavitt
Secretary of Health and Human Services
Department of Health and Human Services
Washington, D.C.

Delegates – Delegados

Dr. William Steiger
Assistant to the Secretary for International Affairs
Department of Health and Human Services
Washington, D.C.

Ms. Ann Blackwood
Director of Health Programs
Office of Technical and Specialized Agencies
Bureau of International Organization Affairs
Department of State
Washington, D.C.

Alternates – Alternos

Mr. Mark Abdoo
International Health Officer
Department of Health and Human Services
Washington, D.C.

Ms. Ginny Gidi
International Health Officer
for the Americas
Office of Global Health Affairs
Department of Health and Human Services
Washington, D.C.
Member States/Estados Miembros (cont.)

United States of America/Estados Unidos de América (cont.)

Alternates – Alternos (cont.)

Ms. Daniela Ligiero
Office of the U.S. Global AIDS Coordinator
U.S. Department of State
Washington, D.C.

Dr. Jay McAuliffe
Senior Policy Officer for the Americas
Centers for Disease Control and Prevention
Department of Health and Human Services
Atlanta, Georgia

Ms. Kelly Saldana
Health Sector Reform Adviser
Bureau for Latin America and the Caribbean
Agency for International Development
Washington, D.C.

Ms. Mary Lou Valdez
Deputy Director for Policy
Office of Global Health Affairs
Department of Health and Human Services
Rockville, Maryland

Ms. Jennifer Peterson
Public Affairs
Office of the U.S. Global AIDS Coordinator
Department of State
Washington, D.C.

Mr. Brian Hackett
Program Analyst
Office of U.N. System Administration
Bureau of International Organization Affairs
Department of State
Washington, D.C.
Member States/Estados Miembros (cont.)

United States of America/Estados Unidos de América (cont.)

Alternates – Alternos (cont.)

Ms. Heather Ward  
Program Analyst  
Office of U.N. System Administration  
Bureau of International Organization Affairs  
Department of State  
Washington, D.C.

Uruguay

Chief Delegate – Jefe de Delegación

Dra. María Julia Muñoz  
Ministra de Salud Pública  
Ministerio de Salud Pública  
Montevideo

Delegates – Delegados

Sr. Juan Enrique Fisher  
Embajador de Uruguay ante la  
Organización de los Estados Americanos  
Washington, D.C.

Delegates – Delegados (cont.)

Dr. Jorge Seré  
Representante Alterno de Uruguay ante la  
Organización de los Estados Americanos  
Washington, D.C.

Alternates – Alternos

Sra. Cristina Carrión  
Ministra Consejera  
Misión Permanente de Uruguay ante la  
Organización de los Estados Americanos  
Washington, D.C.
Member States/Estados Miembros (cont.)

Venezuela

Chief Delegate – Jefe de Delegación

Dr. Carlos Alvarado
Viceministro de Salud y Desarrollo Social
Ministerio de Salud y Desarrollo Social
Caracas

Delegates – Delegados

Dr. Luis Ángel Lira Ochoa
Coordinador del Proyecto de Salud
Ministerio de Salud y Desarrollo Social
Caracas

Lic. Rosicar Mata León
Directora General de la Oficina de Cooperación Técnica
y Relaciones Internacionales
Ministerio de Salud y Desarrollo Social
Caracas

Alternate – Alterno

Sr. Carlos Rodríguez
Primer Secretario
Misión permanente de la República Bolivariana de
Venezuela ante la Organización de los Estados Americanos
Washington, D.C.

Associate Members/Miembros Asociados

Puerto Rico

Dra. Aída González de Gregory
Subsecretaría de Salud
Departamento de Salud
San Juan
Associate Members/Miembros Asociados (cont.)

Puerto Rico

Dr. Raúl G. Castellanos Bran
Asesor del Secretario de Salud
Departamento de Salud
San Juan

Observer States/Estados Observadores

Spain/España

Dr. Juan Romero de Terreros
Embajador, Observador Permanente de España
ante la Organización de los Estados Americanos
Washington, D.C.

Sr. Enrique Asorey Brey
Observador Permanente Alterno de España
ante la Organización de los Estados Americanos
Washington, D.C.

Observer Territories/Territorios Observadores

Anguilla/Anguila

Mr. Merwyn F. Roberts
Permanent Secretary of Health
Ministry of Health and Social Development
The Valley

British Virgin Islands/Islas Virgenes Británicas

Dr. Irad Potter
Director of Health Services
Ministry of Health and Welfare
British Virgin Islands
Observer Territories/Territorios Observadores

Cayman Islands/Islas Caimán

Hon. Anthony Eden
Minister of Health and Human Services
Ministry of Health Services,
Agriculture, Aviation, and Works
Grand Cayman

Dr. A. Kiran Kumar
Chief Medical Officer
Cayman Islands Health Services Department
George Town
Grand Cayman

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Argentina

Dr. Carlos Vizzotti
Subsecretario de Relaciones Sanitarias
e Investigación en Salud
Ministerio de Salud y Ambiente de la Nación
Buenos Aires

United States Of America/Estados Unidos de América

Dr. William Steiger
Assistant to the Secretary for International Affairs
Department of Health and Human Services
Washington, D.C.
Award Winners
Ganadores De Los Premios

PAHO Award for Administration, 2005
Premio OPS en Administración, 2005

Dr. Francisco Rojas Ochoa
Cuba

Abraham Horwitz Award for Leadership in Inter-American Health, 2005
Premio Abraham Horwitz al Liderazgo en la Salud Interamericana, 2005

Dr. Ricardo Uauy
Chile

Manuel Velasco-Suárez Award in Bioethics, 2005
Premio en Bioética Manuel Velasco-Suárez, 2005

Prof. Patricia Sorokin
Argentina

United Nations and Specialized Agencies
Naciones Unidas y Agencias Especializadas

Joint United Nations Program on HIV/AIDS
Programa Conjunto de las Naciones Unidas sobre el VIH/SIDA

Dr. Paloma Cuchí

United Nations Development Program
Programa de las Naciones Unidas para el Desarrollo

Mr. Rogel Nuguid

United Nations Environment Program
Programa de Medio Ambiente de las Naciones Unidas

Ms. Robyn Matravers
United Nations International Narcotics Control Board  
Junta Internacional de Fiscalización de Estupefacientes de las Naciones Unidas

Prof. Hamid Ghodse  
Mr. Koli Kouame

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Representantes de Organizaciones Intergubernamentales

Caribbean Community  
Comunidad del Caribe

Dr. Robert Brohim  
Ms. Jacqueline Joseph  
Dr. Edgard Cireene

Caribbean Environmental Health Institute

Mr. Vincent Sweeney

Economic Commission for Latin America and the Caribbean  
Comisión Económica para América Latina y el Caribe

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Hipólito Unanue Agreement  
Convenio Hipólito Unanue

Dr. Mauricio Bustamante
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Representantes de Organizaciones Intergubernamentales (cont.)

Inter-American Development Bank
Banco Interamericano de Desarrollo

Sr. Alfredo Solari
Sr. Andre Medici

Inter-American Institute for Cooperation on Agriculture
Instituto Interamericano de Cooperación para la Agricultura

Sr. Carlos Manuel Echeverría

Organization of American States
Organización de Estados Americanos

Mr. Paul O. Spencer

The Global Fund to Fight AIDS, Tuberculosis, and Malaria
El Fondo Mundial de Lucha contra el SIDA, la Tuberculosis y la Malaria

Mr. Wolfgang Munar

The World Bank
Banco Mundial

Mr. Fernando Lavadenz M.

Representatives of Nongovernmental Organizations
Representantes de Organizaciones No Gubernamentales

American Red Cross
Cruz Roja Americana

Dr. Jerry E. Squires
Representatives of Nongovernmental Organizations (cont.)
Representantes de Organizaciones No Gubernamentales (cont.)

American Society for Microbiology
Sociedad Interamericana de Microbiología

Ms. Lily Schuermann

Inter-American Association of Sanitary and Environmental Engineering
Asociación Interamericana de Ingeniería Sanitaria y Ambiental

Ing. Alexander Chechilnitzky
Ing. Luiz Augusto de Lima Pontes

International Catholic Committee of Nurses and Medico-Social Assistants
Comité Internacional Católico de Enfermeras y Asistentes Médico-Sociales

Ms. Marylee J. Meehan

International Council for Control of Iodine Deficiency Disorders
Consejo Internacional para la Lucha contra los Trastornos por Carencia de Yodo

Dr. Eduardo Pretell

International Council of Nurses
Consejo Internacional de Enfermeras

Dr. Judith A. Oulton

International Council of Women
Consejo Internacional de Mujeres

Dr. Ariel Rosita King
Representatives of Nongovernmental Organizations (cont.)
Representantes de Organizaciones No Gubernamentales (cont.)

International Diabetes Federation
Federación Internacional de la Diabetes

Ms. Deborah Jones

International Federation of Medical Students’ Associations
Federación Internacional de Asociaciones de Estudiantes de Medicina

Mr. Lawrence Loh

International Federation of Pharmaceutical Manufacturers Associations
Federación Internacional de la Industria del Medicamento

Ms. Margalit Edelman

International Society of Radiographers and Radiological Technologists
Sociedad Internacional de Radiógrafos y Técnicos de Radiología

Ms. B. Patricia Johnson

International Special Dietary Foods Industries

Ms. Mardi Mountford
Mr. John Allan

International Union against Sexually Transmitted Infections
Union Internacional contra Infecciones Transmitidas Sexualmente

Prof. Lew Drusin
Representatives of Nongovernmental Organizations (cont.)
Representantes de Organizaciones No Gubernamentales (cont.)

*Latin American Association of Pharmaceutical Industries*
*Asociación Latinoamericana de Industrias Farmacéuticas*

- Dr. Rubén Abete
- Sr. Eduardo Franciosi

*Latin American Confederation of Clinical Biochemistry*
*Confederación Latinoamericana de Bioquímica Clínica*

- Dr. Norberto Cabutti
- Lic. Elba Suárez de Vargas

*Latin American Federation of Hospitals*
*Federación Latinoamericana de Hospitales*

- Dr. Juan Antonio Larzabal

*The National Alliance for Hispanic Health*
*La Alianza Nacional para la Salud Hispana*

- Ms. Marcela Gaitán

*United States Pharmacopeia*

- Ms. Nancy Blum

*World Association for Psycosocial Rehabilitation*
*Asociación Mundial para la Rehabilitación Psicosocial*

- Mr. Humberto L. Martínez
Representatives of Nongovernmental Organizations (cont.)
Representantes de Organizaciones No Gubernamentales (cont.)

World Association for Sexual Health
Asociación Mundial para la Salud Sexual

Mr. Eli Coleman

World Federation of the Deaf
Federación Mundial de Sordomudos

Ms. Senda Benaissa

World Self-Medication Industry
Industria Mundial de la Automedicación Responsable

Lic. Héctor Bolaños

World Health Organization
Organización Mundial de la Salud

Dr. Jong-wook LEE
Director-General
Geneva

Dr. Anarfi Asamo-Baah
Assistant Director-General
Communicable Diseases
Geneva

Dr. Anders Nordstrom
Assistant Director-General
General Management
Geneva

Dr. Ian Michael Smith
Adviser to the Director-General
Geneva
**World Health Organization (cont.)**
**Organización Mundial de la Salud (cont.)**

Dr. Michael J. Ryan  
Director  
Office for Alert and Response Operations  
Geneva

Dr. Mario Raviglione  
Director  
Stop TB  
HIV/AIDS, TB, and Malaria  
Geneva

Dr. Steffen Groth  
Director  
Essential Health Technologies  
Health Technologies and Pharmaceuticals  
Geneva

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**Pan American Health Organization**  
**Organización Panamericana de la Salud**

**Director and Secretary ex officio of the Council**  
**Directora y Secretaria ex oficio del Consejo**

Dr. Mirta Roses Periago

**Advisers to the Director**  
**Asesores de la Directora**

Dr. Joxel García  
Deputy Director  
Director Adjunto

Dr. Carissa Etienne  
Assistant Director  
Subdirectora
Pan American Health Organization (cont.)
Organización Panamericana de la Salud (cont.)

Advisers to the Director (cont.)
Asesores de la Directora (cont.)

Dr. Daniel López Acuña
Director of Program Management
Director de Gestión de Programas

Ms. Dianne Arnold
Acting Director of Administration
Directora Interina de Administración