PAHO and the Ministry of Health of Argentina announce two publications about the World Fair on Municipalities and Health

The National Healthy Municipalities and Communities Program of the Argentine Ministry of Health and the Pan American Health Organization (PAHO) Representative’s Office in the country launched two publications related to the World Fair on Municipalities and Health: rights, citizenship, and integrated local management for development that took place in August 2009 in Buenos Aires.

Approximately five thousand people participated in this event that included more than 500 speakers of various countries, 150 poster presentations from municipalities, international agencies, public institutions and NGOs. The four-day event also included conferences, intensive workshops, working groups, discussion panels and presentations of health promotion experiences.

Activities were organized around four themes: public policies in the health sector, health determinants, civil rights, and integrated management for local development. Featured speakers included the participation of the

(Continued on page 2)
mony was devoted to the January 12th earthquake in Port-au-Prince, Haiti - this emphasized the importance of urban infrastructure during times of natural disaster. Ricardo Mena, Regional Coordinator of the United Nations International Strategy for Disaster Reduction, officially launched the “One Million Safe Schools and Hospitals Campaign” as a part of UN efforts to prepare cities for natural disasters; a video was shown that depicted the problems of rapid urbanization in Haiti and the consequences it had for the aftermath of the earthquake. Included was the testimony of earthquake survivor Rick Santos. Fire Chief Ronald Mastin and the “Virginia Task Force One’ urban search-and-rescue team from Fairfax County received special recognition from PAHO for their recovery efforts in Haiti following the earthquake.

To bring the day to a close, Howard Frumkin, from the Centers for Disease Control and Prevention launched the PAHO-produced Spanish version of the book “Environmental Health: From Global to Local”. Frumkin cited the importance of connectedness, collaboration and capacity building in efforts to create healthier and better communities. And finally, Marilyn Rice, PAHO’s Senior Advisor on Urban Health and Determinants of Health, closed the panel with a discussion of the way forward. Rice noted that despite the problems posed by increasing urbanization, each city is also a source of resources for overcoming such problems: “It is a question of marshalling those resources and bringing people together from all walks of life.”

For more information, please see:
http://www.paho.org/whd2010

PAHO Celebrates World Health Day 2010 on Urbanism and Healthy Living

(Continued from page 1)

PAHO and the Ministry of Health of Argentina announce two publications about the World Fair on Municipalities and Health

(Continued from page 1)

President of Argentina, Cristina Fernandez de Kirchner; the Minister of Health, Juan Manzur; the Director of PAHO, Mirta Roses; the UNDP Advisor Bernardo Kliksberg; as well as Erio Ziglio and Maria Neira from WHO, among others.

The materials summarize the activities that took place, and the experiences that were presented from more than 50 municipalities during the fair. It is expected that these materials will help to preserve these experiences, so that they can serve as models to be replicated in other countries of the Region and around the world.

Journal “A Fair For Health”

Publication of Municipal Experiences

20th IUHPE World Conference on Health Promotion

The 20th IUHPE World Conference on Health Promotion: Health, Equity and Sustainable Development, will take place in Geneva, Switzerland, from July 11-15, 2010. Fifteen prominent and inspiring keynote speakers have been invited to share their insights on Health Promotion and Sustainable Development. Over two thousand professionals and decision makers from all over the world from the fields of health promotion, public health and sustainable development are expected to attend.

To register and for more information, check the website:
http://www.iuhpeconference.net/
Call for Nominations Open Now for the 2010
Awards for Excellence in Inter-American Public Health

Media Contact: Ashley Gatewood: gatewooa@pahef.org (+1-202-974-3727)

Nominations are being accepted online now at http://www.pahef.org/awards/nominations for the 2010 Awards for Excellence in Inter-American Public Health, a joint program of the Pan American Health and Education Foundation (PAHEF) and the Pan American Health Organization (PAHO). These awards honor dedicated professionals who led the way in advancing health conditions in the Americas during the last century and are intended to stimulate the growth of the next and rising generation of leaders working to improve health and health care in the Americas.

Awards with a nomination deadline of June 15, 2010, 5:00 p.m. EST:

- Abraham Horwitz Award for Excellence in Leadership in Inter-American Health
- Pedro N. Acha Award for Excellence in Veterinary Public Health
- Fred L. Soper Award for Excellence in Health Literature
- Clarence H. Moore Award for Excellence for Voluntary Service

Awards with a nomination deadline of June 30, 2010, 5:00 p.m. EST:

- Manuel Velasco Suárez Awards for Excellence in Bioethics
- Sérgio Arouca Award for Excellence in Universal Health Care

Each awardee receives a cash prize or grant, a certificate of honour, and a paid trip to Washington, DC where (s)he is presented with an award at the annual PAHO/PAHEF Awards for Excellence in Inter-American Public Health Event; at this event, the awardee is recognized before the Ministers of Health of the Region at the PAHO Directing Council Meeting.

Past winners of the esteemed Awards for Excellence in Inter-American Public Health are some of the most recognized individuals and organizations working in the field of public health throughout the Western Hemisphere.

(Continued on page 4)
Notable past winners include:

Dr. Eduardo A. Pretell Zárate (Abraham Horwitz Award for Excellence in Leadership in Inter-American Health), former Minister of Health of Peru. He was the founder of the National Iodine Deficiency Control Program in Peru and is the Regional Coordinator for Latin America in the International Council for the Control of Iodine Deficiency Disorders.

Dr. Ricardo Uauy (Abraham Horwitz Award for Excellence in Leadership in Inter-American Health), world-renowned nutritionist, pediatrician, and professor. He is currently a professor of public health nutrition at the London School of Hygiene and Tropical Medicine. He formerly worked at the Institute of Nutrition and Food Technology (INTA) at the University of Chile.

Mrs. Mary Pérez de Marranzini (Clarence H. Moore Award for Excellence for Voluntary Service), director for more than 40 years of the Dominican Rehabilitation Association in the Dominican Republic.

Dr. Cesar Victora (Abraham Horwitz Award for Excellence in Leadership in Inter-American Health), a leader in addressing the health problems of mothers and children, particularly infant nutrition and child growth, in Latin America and worldwide. He is currently a professor of epidemiology at the Federal University of Pelotas in Brazil.

Dr. Guilherme Luiz Guimaraes Borges (Fred L. Soper Award for Excellence in Health Literature), for the paper, “Traumatic Events and Suicide-related Outcomes among Mexico City Adolescents.”

Dr. Ilane Hernández Morales (Pedro N. Acha Award for Excellence in Veterinary Public Health), for her thesis “Preparation and Assessment of a DNA Vaccine Versus Salmonella enterica Serovar Enteritidis Outer Membrane Protein A (OmpA) in Laying Hens.”

Patricia Sorokin, a researcher and graduate of Buenos Aires University, for her paper entitled, "Treatment of Personal Data on Genome Research: Bioethical, Legal, and Social Aspects."

A jury of distinguished public health professionals will review nominations and recommend a candidate for each award to the Board of Trustees of the Foundation for final selection.

To learn more about the specific criteria for these awards, please visit www.pahef.org/awards.
The Community Tool Box is now fully available in Spanish

The Community Tool Box – a free, public resource for bringing about community change and improvement – is now fully available in Spanish as well as English. As a public service of the Work Group for Community Health and Development at the University of Kansas (originally supported by the Robert Wood Johnson Foundation), this Tool Box contains more than 7,000 pages of how-to information. This resource contains capacity-building tools about how to create coalitions, how to build partnerships to sustain community efforts, and everything in-between.

The Community Tool Box provides many tools like the ones above that empower people to come together to create conditions to promote health and health equity. Many people from Latino communities in the United States and elsewhere throughout the Americas have benefited from the helpful tools and resources available through the Community Tool Box.

Since 1995, people have used the Community Tool Box to address important issues in their communities, such as improving access to health care, preventing chronic diseases, promoting physical activity and healthy nutrition, addressing determinants of health, and addressing health disparities.

We hope that you will access the Community Tool Box online; either in Spanish http://ctb.ku.edu/es or English http://ctb.ku.edu/en. We also invite you to sign up with us on Facebook or Twitter and to pass this valuable resource along to others. Feel free to use the “Share” feature from the pages of the Community Tool Box to email, print, or share these free tools.

Thank you for the work you do to change our communities and assure health and well-being for all of us. We hope that these tools will be helpful levers in your important work. By working together, we can change our communities – and our world.

The Toolkits linked below outline key tasks, examples, and support for 16 core competencies or skill areas:

1. Creating and Maintaining Coalitions and Partnerships
2. Assessing Community Needs and Resources
3. Analyzing Problems and Goals
4. Developing a Framework or Model of Change
5. Developing Strategies and Action Plans
6. Building Leadership
7. Developing an Intervention
8. Increasing Participation and Membership
9. Enhancing Cultural Competence
10. Advocating for Change
11. Influencing Policy Development
12. Evaluating the Initiative
13. Implementing a Social Marketing Effort
14. Writing a Grant Application for Funding
15. Improving Organizational Management and Development
16. Sustaining the Work or Initiative

“Thank you for saving us from hours or days of searching for methods. Your site enables me...to immediately get to work on the project.” – University student and nurse in Tampa, Florida, United States

“I am very motivated to incorporate the tools from the Tool Box...They are straightforward and, more importantly, they can create positive results and cause a large impact in communities.” Quote from a community nursing professor in Maracaibo, Zulia, Venezuela
Proposals for strengthening health promotion and public health in Latin America

Office of Communication–Center for the Development and Evaluation of Policies and Public Health Technology, CEDETES.

The Center for the Development and Evaluation of Policies and Public Health Technology, CEDETES, of the University del Valle, Colombia, recently launched the book “Effectiveness in Health Promotion and Public Health: reflections on the practice in Latin America and proposals for change”, authored by its Director, Ligia de Salazar. This publication emerged as a result of the growing demand in Latin America for theory and practical inputs to facilitate the evaluation of health promotion interventions and programs.

The text incorporates the 10-year experience of this PAHO/WHO Collaborating Center in health promotion evaluation, training, and advocacy, and experiences from participants in courses and evaluation seminars that have been developed in various Latin American countries. Moreover, it included the results from consultations, forums, and documents from the Latin American Network on the Evidence of Effectiveness, established within the framework of the Regional Project of Evidence of Health Promotion Effectiveness; and contributions from participants of the Latin American Virtual Course on Evaluation of Health Promotion Effectiveness.

These experiences have had the support of various international organizations, especially that of the Centers for Disease Prevention and Control, CDC, of the United States; the Pan American Health Organization, PAHO; and the International Union for Health Promotion and Health Education, IUHPE.

About the practice of health promotion

(Continued on page 7)

Two experiences of the Municipality of Esquel, Argentina, were selected for the International Congress of Educating Cities: Program "Living Esquel" and "Sports Technical Assistance Cabinet"

Area of Communication and Press of the Municipality of Esquel, Argentina

Two initiatives of the municipality of Esquel, Argentina, were recently selected to participate in the XI International Congress of Educating Cities, "Sport, public policies and citizenship: Challenges of an Educating City”, that took place in the City of Guadalajara, Mexico, from April 22-24, 2010. "Living Esquel" is the comprehensive proposal of the municipality of Esquel developed within the framework of the Healthy Municipalities Strategy. The initiative incorporates health promotion, sports and recreation for healthy life. The "Sports Technical Assistance Cabinet, an interdisciplinary and inter-institutional experience," resulted from an initiative of the Department of Sports and Recreation, in collaboration with professionals from the areas of psychology, nutrition, medicine and physical education.

The XI Congress organized by the International Association of Educating Cities (AICE, its acronym in Spanish) focused on sports as a tool of inclusion and social cohesion, in addition to generating benefits for health and the environment. Issues that were analyzed and discussed included health and environment, social inclusion and citizen participation, public policies and urban space, culture of peace, and education and identity.

In the case of the selected experiences from Esquel, "Living Esquel" aims to promote healthy life habits, with a main emphasis on cardiovascular health. This program was developed to address issues related to sedentary lifestyle, obesity and its comorbidities. The initiative aims to: 1. Promote healthy life habits: through a media campaign that uses TV, radio and the press to address issues such as rest, oral health, stress and occupational health; 2. Promote physical activity in all sectors: by generating a model of living that is not that of a sedentary lifestyle, and by facilitating the creation of public spaces and technical assistance for the organization of physical activity and sports; 3. Discourage substance abuse behaviors, mainly consumption of alcohol and tobacco: by generating proposals for local ordinances that redefine the role of the State in relation to these two substances; 4. Promote healthy diet in schools and through local food distributors.

Esquel Living Program, as a space of articulation between various public and private entities, has been considered as a basis for the development of the municipal health plan. Its actions are directed to the entire community and it makes an effort to include groups from a variety of ages and socioeconomic, cultural, and educational backgrounds. It is an encompassing program with comprehensive approaches that incorporate strategies targeted to specific groups; for example, concrete actions have been designed for teachers, children ages 6 to 10 years, adolescents and adults.

In the case of the "Sports Technical Assistance Cabinet, an interdisciplinary and (Continued on page 11)
Proposals for strengthening health promotion and public health in Latin America

(Continued from page 6)

- Type, scope, and design of interventions, taking into account the concept of complexity both of the interventions and of the systems in which they are implemented.

- Process of implementation of interventions and the influence of context variables.

- Effectiveness and related factors: what do we ask ourselves and what do we know about evaluation?

- Uses for the information and contributing factors

After analyzing the above issues in light of national and local experiences, we conclude that there is a huge gap between health promotion theory and practice. This gap is influenced by several factors, including the simplification of the interventions in contrast to the broad scope of objectives and intentions. In practice, the time needed for implementation, as well as to the lack of concrete actions to modify structures to make them viable, limits the possibilities for achieving the expected results. The final conclusion of the book is summarized in a single phrase: “We do what we can in health promotion and public health!” Moreover, the book calls upon the creation of strategies and concrete and effective mechanisms that will make it possible for our countries to influence the factors that hinder the implementation and the achievement of results in health promotion.

For more information please contact:
Ligia de Salazar–Director CEDETES.
cedetes@cedetes.org
cedetes@univalle.edu.co

Pilot Program on Oral Health for Schoolchildren of the Department of Canelones, Uruguay

Dr. Alicia Guadalupe, Coordinator of the Oral Health Program for schoolchildren of the Department of Canelones

Caries are a multi-factorial, communicable, infectious and chronic disease, very prevalent in childhood and are the main cause of dental loss. It is considered a public health problem because more than 90% of the population has suffered from caries at some point in its life. The problem worsens and becomes more complex with time and its care implies a high cost for the individual. Even though there are preventive measures available, there is not enough emphasis on oral health promotion and prevention.

The Department of Canelones, Uruguay, does not escape from this reality. In 2006, an epidemiological survey of oral health was conducted among schoolchildren of the Department. One of the most relevant findings was that 86% of caries found in “permanent teeth” of 6th graders were without treatment. The percentage of untreated caries at urban, rural, and private school students ranges between 73.7% and 81.4%.

Taking into account that similar actions were limited, especially those targeting areas of greater vulnerability and difficult access, with the technical cooperation of PAHO/WHO Representative Office in Uruguay, the "Pilot Program for Oral Health Intervention in Schoolchildren of the Department of Canelones" (Ministry of Public Health and Community of Canaria) was developed between 2006 and 2009.

This Program promotes a model of change, by which fundamental importance is placed on health promotion and strengthening of the first level of care, framed within the Healthy and Productive Communities Strategy, which aims at creating opportunities and conditions for people to work together to improve their quality of life.

The actions are planned to respect the local history and context. Experiences and visions are collected in each community, usually through a local community facilitator, most often the community school Director. The facilitator for the Canelones Oral Health Program is the local dentist, who works in that community and has experience in health promotion and dental care. The links with the health sector were created by establishing partnerships and joint efforts to optimize resources and adapt them to local contexts.

Main Program Pillars

General and Oral Health Promotion

The Program worked in schools taking into account the concept of "integrated development of boys and girls", respecting its comprehensive nature in each particular community, and using all available opportunities (formal and non-formal) to develop learning processes and to promote healthy lifestyles.

(Continued on page 8)
Healthy lunchbox competitions were launched in collaboration with a nutritionist from the National Public Education Administration, the creation of greenhouses and family and community vegetable gardens were promoted, and plays, games, dances and songs that addressed health issues were conducted in the community. For oral health, the program promoted the development of habits with correct tooth brushing using fluoride toothpaste, the correct use of dental floss, and an adequate diet taking into account frequency, quality, quantity, and the cost of food intake.

**Timely Care**

The second principle was based on delivering timely care for oral pathology with Atraumatic Restorative Treatment (ART), which is a technique that opened a new horizon in addressing caries disease. It is delivered manually, in a timely fashion and without trauma, using hand instruments.

It is used mostly as a preventive measure, sealing the first permanent molar to avoid caries. Only the decayed or sick tissue is eliminated and the tooth is filled with a state-of-the-art material that is biocompatible with the dental pulp, called glass ionomer. This material subsequently continues to release fluorine to help to the maturation and strengthening of the dental enamel. Traditional odontological equipment is not used, making this technique cost-effective and timely for the treatment of caries.

**Referral**

Cases in which the ART technique could not solve the problem were referred to the appropriate health centers and mobile odontological units. These were addressed like any other recognized pathology and with an interdisciplinary team. Table 1 summarizes the number of children seen per year of the Program.

**Conclusions**

Given that the etiology of caries is multi-factorial, and that cultural and socioeconomic factors have a predominant role, an integrated approach needs to be used. Activities should incorporate a strong educational and preventive component with timely care of caries.

The knowledge of the ART technique has been fundamental to reaching all communities where access to dentistry was practically non-existent. In this way, we can provide equitable, quality and caring services to the entire population with this technique. We provide prevention by sealing permanent molars that are at risk, and by delivering timely care of caries, thereby avoiding referrals to health centers.

For more information contact: Dr. Alicia Guadalupe, Program Coordinator: albelu99@adinet.com.uy

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**Table 1. Summary of Activities**

<table>
<thead>
<tr>
<th>Activities</th>
<th>August-December 2006</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children that attended the Oral Health Promotion</td>
<td>No data</td>
<td>15,388</td>
<td>22,391</td>
<td>27,652</td>
</tr>
<tr>
<td>Children treated with ART technique</td>
<td>1,157</td>
<td>6,933</td>
<td>4,127</td>
<td>5,198</td>
</tr>
<tr>
<td>Sealants</td>
<td>1,808</td>
<td>4,987</td>
<td>6,741</td>
<td>9,894</td>
</tr>
<tr>
<td>Fillings</td>
<td>730</td>
<td>2,823</td>
<td>1,944</td>
<td>6,236</td>
</tr>
<tr>
<td>Referrals</td>
<td>344</td>
<td>2,359</td>
<td>2,557</td>
<td>1,887</td>
</tr>
</tbody>
</table>
Cinema and Health Program: An initiative to promote adolescent health

Javier Gallego, Public Health Directorate of the Government of Aragón, Spain

The Cinema and Health Program: an authentic look was launched in 2001 by the Health and Education Commission of the Government of Aragón, Spain. Its purpose is to promote the integration of education for health into secondary education (students 12-16 years old). The program addresses adolescent health from three dimensions: individual, relational and environmental. Using cinema as a health education resource allows adolescent health issues to be addressed by focusing on attitudes and personal skills and by clarifying values.

The Cinema and Health Program includes three activity areas:

A) **Utilization of cinema in the classroom:** Through the use of teaching guides and workbooks, students address issues of health promotion by reflecting and analyzing situations faced by characters in the film of focus.

B) **Development of short films:** With the goal of improving media literacy and building health messages from a youth perspective, students create films with support from their teachers. The works are presented in the Cinema and Health Festival; short film finalists are published on a DVD which is then used as teaching resource. The winners of the final edition can be seen on YouTube at: www.youtube.com/user/SARESARAGON;

C) **Development and sharing of experiences:** With the objective of encouraging participation, courses and opportunities to exchange experiences are offered; new and innovative experiences are published.

Cinema, city, and health

To address the issue of globalization and health the film *Slumdog Millionaire* (2008) was selected; this film was directed by Danny Boyle from the United Kingdom, and received eight Oscars. The story portrays the life of a young orphan and his companions in a slum of Bombay, India. The film is a mixture of Bollywood comedy and suspense. Although the film has received some criticisms for its negative portrayal of marginal areas of India, its plot captures the attention of adolescents and gives insight into the contexts of the city, its neighborhoods, its people, and the struggle for survival. All of this is intertwined with the reality of a globalized world, represented by telemarketers, advertising, and TV competitions.

The instructional material to guide the discussions about the film with adolescents and young adults aims to help them observe the social context in which the protagonists live. Youth are encouraged to relate aspects of globalization to health and to analyze how inequalities, mainly economic inequalities, deteriorate health and ecological and social sustainability. The contents that are addressed are: globalization and lack of equity, the social determinants of health and inequalities, and healthy attitudes toward consumption. The activities are developed based on the determinants of health and are linked with the film’s narration.

Although this material was developed for high school education, it can be used in other informal contexts and spaces to work with groups of young people. Other related issues are healthy communities, healthy spaces and sustainable development for which the Argentine film *A place in the world* (1992) by Adolfo Aristarain, and the French movie *l’Auberge espagnole* (2002), directed by Cédric Klapisch, are used. All the materials and pedagogical resources can be downloaded from www.cineysalud.com

For more information about this initiative contact: Javier Gallego: jgallego@aragon.es
Origins and Evolution of the Ecological Blue Flag Program in Costa Rica

Darner Mora Alvarado, Public Health Professional

The former AyA Central Laboratory, today known as the National Laboratory of Costa Rica’s Waters (LNA), was created in 1963 with the goal of controlling the quality of drinking water produced for human consumption by the metropolitan water supply system (Communities of Tibas, Coronado, Escazú, Desamparados, San Pedro, Curridabat, Tres Ríos, San Miguel, Aserrí and the Capital City of San José). With its expansion and growth, AyA later assumed the responsibility for quality control of water for human consumption for the urban water supply systems of Liberia, Pérez Zeledón, Limón, Santa Cruz, among others.

In the 1970s, a study was conducted of the quality of the sea water in the beaches of Limón Centro, because the sewerage under AyA’s responsibility discharged wastewater, without treatment, directly onto the coastline. In 1986 and 1987 the first national study “Bacteriological Criteria and Sanitary Quality of the Waters of Costa Rican Beaches.” was prepared on the quality of beaches. Even though the report was successfully disseminated at the national and international levels, the recommendations to correct the sources of fecal contamination on five beaches were not applied by the corresponding sanitary entities.

The 1991 cholera pandemic resulted in the “National Cholera Prevention Program” which required the display of a warning label along bodies of polluted water such as rivers, marshes, and beaches. However, these labels were removed by the communities themselves, who argued the warnings had a negative effect on tourism.

In 1995 the undersigned completed an internship at the Alicante (Spain) Laboratory of Waters, where I observed the sea water desalination system in Las Palmas, Canary Islands. In this location, specifically at the Ingles beach, I observed for the first time a blue flag waving, whose meaning represented cleanliness, access to drinking water and adequate excreta disposal.

Impressed by the philosophy of the European Blue Flag Program, in 1995 the Ecological Blue Flag Program (PBAE, for its acronym in Spanish) was created in Costa Rica. Its goal was to establish an incentive to motivate civil society organizations and to promote the development of the coastal area while protecting its sea and beaches. The support of Dr. Anna Gabriela Ross, Executive President of the AyA from the period 1994-1998, played an essential role in the creation of the PBAE; together we presented the project to the Board of Directors. The initiative was approved under the agreement 96-160 of 4 June 1996.

The wisdom of Dr. Ross, permitted the administration of the program to be managed through a national Inter-institutional Commission, formed at that time by the Costa Rican Institute of Tourism, the Ministry of Health, the National Chamber of Tourism, the Ministry of Environment and Energy, and the Costa Rican Institute of Water Supply Systems and Sewerage. This commission has provided an enormous strength to the program, since its interinstitutionality has protected it against the sways of political change.

After 5 years of being effective and successful, the National Commission of the Ecological Blue Flag Program (CNPBAE) developed its first “Strategic Plan for 2001-2006,” which identified and analyzed the program’s weaknesses, strengths, threats and opportunities. This plan also established new goals, such as the expansion of the PBAE to other categories. In 2002, a second category was created for communities located further inland; this category was based on the PBAE experience that recognized that beach contamination was caused by the discharge of waste into the rivers, that later flowed onto the coasts, contaminating the beaches.

The same strategic plan, identified that one of the greatest weaknesses of the PBAE was the lack of potable and good quality drinking water in the coastal areas. This resulted in the development of the “Sanitary Quality Certification Program” (PSCS, for its acronym in Spanish) in the LNA. The goal of this program was to organize the entities that operated the water supply systems so that they would provide drinking water services of good quality, that would be sustainable and in harmony with nature. The PSCS is PBAE’s “little brother”, and it has played an essential role in the development of different PBAE categories. In 2004, thanks to Dr. Abel Pacheco de la Espriella, President of Costa Rica from 2002 to 2006, a third category was created, focusing on educational centers. In 2006 the program “Natural and Protected Spaces” was expanded, and in 2008 categories 5 and 6 were established for “Hydrologic Microbasins” and “Actions to face Climate Change”. In 2009, the category focusing on “Neutral Climate Communities” was created.

As described, the evolution of the PBAE initiated with the protection of water resources, starting with beaches and extending into communities where the rivers are contaminated. Then the category “Educational Centers” was created to expand the philosophy of cleanliness and hygiene into schools and universities, but especially with the goal of incorporating the program into the educational system and thus ensuring its continuity for new generations. The establishment of the “Natural and Protected Spaces” and “Hydrologic Microbasins” category aimed at protecting natural water sources and protecting gorges and rivers. Finally category 7 integrates all of the other program categories, with the objective of creating communities with “neutral climates” by estimating their emissions of greenhouse gases, and carrying out actions to mitigate these effects. It is expected that the application of the PBAE will support the country in its quest to meet its proposed goal of being the first country “neutral carbon” in 2011.

For more information contact: dmora@aya.go.cr
Two experiences of the Municipality of Esquel, Argentina, were selected for the International Congress of Educating Cities: Program "Living Esquel" and "Sports Technical Assistance Cabinet"

(Continued from page 6)

inter-institutional experience," professionals will present the work performed within the framework of the planned areas of work: High Performance Sport; Sport and Society; Health Promotion and Inter-institutional Alliances; and Training and Communication - addressing the experience gained in the context of Esquel’s schools, clubs, coaches and athletes.

For more information contact:

Area of Communication and Press:
acypmunicipal@esquel.gov.ar

Sports Technical Assistance Cabinet:
gadesquel@yahoo.com.ar

Program "Living Esquel:"
viviresquel@hotmail.com