NONGOVERNMENTAL ORGANIZATIONS IN
OFFICIAL RELATIONS WITH PAHO

Review of PAHO Collaboration with Inter-American and
National Nongovernmental Organizations in Official Relations

Introduction

1. With regard to the official relations of the Pan American Health Organization (PAHO) with nongovernmental organizations (NGOs), the Special Session of the Executive Committee held on 11 January 2007 established, in its Resolution CESS.R1 (Revision of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations), that the Subcommittee on Program, Budget, and Administration will “review applications received and submit a recommendation for action by the Executive Committee. It will also periodically review collaboration with NGOs and make recommendations to the Executive Committee concerning renewal of such collaboration.”

Applications Received from Nongovernmental Organizations

2. Following the procedure set forth in section 4.3 of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations (the Principles), the Subcommittee will review the application of one NGO—namely, Mundo Sano, which submitted its formal request to be admitted into official relations with PAHO before the deadline of 31 December 2015.

Mundo Sano

3. Mundo Sano [Healthy World], founded in 1993, with headquarters in Buenos Aires, Argentina, seeks to promote research, technological innovation, and education for health in formal and non-formal areas to improve people’s quality of life and general welfare, acting in areas related to the medical, agricultural, veterinary, biological,
physical, chemical, and natural sciences. Its main fields of work include developing new programs for interventions aimed at tackling various neglected infectious diseases and vector-borne diseases, as well as training and dissemination, scientific and technical linkage, and work with vulnerable communities.

4. *Mundo Sano* has been collaborating informally with PAHO for several years. The many collaborative activities include: a) the XV International Symposium on Epidemiological Control of Vector-borne Diseases (2012); b) the 3rd National Meeting on Neglected Diseases (2012); c) the XVI Symposium on Epidemiological Control of Vector-borne Diseases (2013); the 4th International Meeting on Neglected Diseases, under the auspices of PAHO (2013); d) the VII Meeting of the Initiative of the Amazon Countries for Surveillance and Control of Chagas Disease (AMCHA) (2014); e) the regional consultation on medical care indicators of Chagas disease (2015); f) the XVII International Symposium on Neglected Diseases (2015); g) the XVI Meeting of the Central America and Mexico Initiative for the Control of Vector-borne and Transfusion Transmission, and Medical Care of Chagas Disease (2015); and h) the 21st Meeting of the Southern Cone Intergovernmental Commission (INCOSUR) for the Prevention, Control, and Treatment of Chagas disease (2015).

5. Other noteworthy activities included: a) participation in the workshop on capacity-building in Latin America and the Caribbean in response to epidemic and pandemic outbreaks (2015); b) support for the organization of the (theoretical and practical on-site) VIII Course on Viral Hemorrhagic Fevers (2015); c) collaboration in arbovirus campaigns (dengue, chikungunya and Zika) (2015); and d) support for preparedness and response of Southern Cone countries to dengue, chikungunya, and Zika.

**Renewal of Collaboration with Nongovernmental Organizations**

6. The Subcommittee will also review collaboration with the following eight nongovernmental organizations: the Asociación Latinoamericana de Industrias Farmacéuticas [Latin American Association of Pharmaceutical Industries] (ALIFAR), Panamerican Federation of Associations of Medical Schools (PAFAMS), Pan American Federation of Nursing Professionals (FEPPEN, for its acronym in Spanish), Latin American Federation of Hospitals (FLH, for its acronym in Spanish), Healthy Caribbean Coalition (HCC), Inter-American College of Radiology (CIR, for its acronym in Spanish), Latin American and Caribbean Women’s Health Network (LACWHN), and the Interamerican Society of Cardiology (SIAC, for its acronym in Spanish).

**Asociación Latinoamericana de Industrias Farmacéuticas [Latin American Association of Pharmaceutical Industries] (ALIFAR)**

7. The *Asociación Latinoamericana de Industrias Farmacéuticas* (ALIFAR) is the organization that brings together domestically-owned pharmaceutical companies in the countries of Latin America. Founded in 1980, its priorities are cooperation and mutual recognition among businesses in the different countries of the Region; support and strengthening of national companies in each Member State; and the promotion and
defense of their mutual interests at the international level. At present, ALIFAR is made up of over 400 companies in 14 Latin American countries, representing more than 90% of the regional pharmaceutical market.

8. In the last four years, ALIFAR has collaborated with PAHO in the following activities, among others, in the framework of their collaborative work plan:

   a) preparation of the VII Pan American Conference on Drug Regulatory Harmonization held on 5-7 July 2013;

   b) meeting of the Ad Hoc Group on the Strategic Plan of the Pan American Network for Drug Regulatory Harmonization (PANDRH) 2014-2020 (2011);

   c) collaboration in the Ad Hoc Governance Group for the updating of the PANDRH statutes;

   d) collaboration in the International Conference of Drug Regulatory Authorities (ICDRA) on biosimilars;

   e) contribution to cooperation activities carried out by the PAHO Medicines and Health Technologies Unit related to WHO-recommended standards for assuring the quality, safety, and efficacy of biological drugs;

   f) support for activities to strengthen regional regulatory capacities;

   g) technical contributions to discussions leading to the drafting of the PANDRH document on priority areas and project selection, approved by the PANDRH Steering Committee in December 2015.

9. Over the next four years, collaboration between PAHO and ALIFAR will focus on the following activities:

   a) discussions between the regulated sector and the regulator on subjects of importance aimed at ensuring drug quality, safety, efficacy, and access;

   b) dissemination of information on the productive capacities of the countries of the Region with regard to drug manufacture, innovation, and defense of the sector as a source of employment in the face of economic threats and international trade;

   c) identification of measures and actions to promote regulatory convergence both within subregional integration frameworks and in the domain of PANDRH;

   d) technical and scientific support for regional and global consultations on drug quality, safety, and efficacy, including biologicals;

   e) support for activities carried out in PANDRH projects, and for the preparation of PANDRH conferences.
Panamerican Federation of Associations of Medical Schools (PAFAMS)

10. The basic objectives of the Pan American Federation of Associations of Medical Schools (FEPAFEM) are to: a) promote the quality of medical education with an impact on health, through academic activities, research, and extension; and to improve the quality of medical education in the Member States, including initiatives related to accreditation and continuous professional development; b) contribute to leadership in medical education in the Americas, through the promotion of a training system and of a “culture of quality” among health professionals, on behalf of the population; and c) facilitate the continuous sharing of experiences and research to improve the quality of medical education, while emphasizing continuous medical education focused on meeting the social needs and demands of communities.

11. Over the last four years, among other actions, FEPAFEM has collaborated with PAHO, in accordance with the collaborative work plan, on the following lines of work:
   a) transformation of medical education within the framework of universal health coverage: promoting a commitment to the social mission of medical schools to strengthen primary health care and the scope of universal health coverage;
   b) workshop on health sciences and primary health care: technical meeting held in Cartagena, Colombia, in June 2011;
   c) Pan American Conference on Medical Education (COPAEM) 2013, which provided a technical space for sharing experiences on medical education.

12. The proposed joint work plan for the next four-year period refocuses the programs and strategic lines of action in accordance with current social and economic realities. It includes partnerships with institutions that share values and interests, promoting institutional accreditation.

13. The lines of collaboration between FEPAFEM and PAHO over the next four years will include, among others:
   a) a Promise Renewed for the Americas;
   b) study medical school accreditation mechanisms in order to improve the quality of medical education in our Region, considering the institutional situation in each country;
   c) Pan American Conference on Medical Education (COPAEM 2016) for dissemination of up-to-date information relevant to medical education, as well as the establishment of strategic relations with related institutions.

Pan American Federation of Nursing Professionals (FEPPEN)

14. The Pan American Federation of Nursing Professionals (FEPPEN) was founded in 1970, with its rotating headquarters currently located in Havana, Cuba. FEPPEN’s
main goals are to: a) promote the scientific, political, economic, and social development of the profession and of nursing workers in the Region; b) define guidelines, goals, and targets that support the collective, cooperative work of its member organizations; and c) defend the right to health and social security in the countries of the Region.

15. During the last four years, in support of the collaborative work plan with PAHO, FEPPEN carried out the following activities: a) participation in an international study on migration of nurses; b) review of the regional study on nursing regulations; c) study and recommendations for the equivalency of nursing titles; d) dissemination initiative; e) study and implementation of International Labor Organization (ILO) Convention 149; f) initiative to define new strategic guidelines on nursing and midwifery; g) PAHO Universal Access to Health and Universal Health Coverage: Advanced Practice Nursing Summit; h) facilitator training: “Training to help babies breathe”; i) preventing and tackling Ebola virus disease; j) participation in the Third Global Forum on Human Resources for Health in Recife, Brazil; k) collaboration in the organization of Strengthening the role of human resources in nursing and midwifery in achieving universal health coverage: challenges and possibilities in Recife (Brazil); l) technical meeting on interventions for neonatal health; and m) Pan American Nursing Symposium of the Neonatal Alliance.

16. During the next four years, PAHO and FEPPEN will carry out the following activities: a) promote the contribution of nursing to universal access to health and universal health coverage; b) promote the transformation of college- and graduate-level nursing education; c) promote information and evidence in support of health systems; and d) promote the education, availability, and necessary distribution of human resources in nursing.

**Latin American Federation of Hospitals (FLH)**

17. The Latin American Federation of Hospitals (FLH), based in Buenos Aires, Argentina, and operating since 1976, brings together the national hospital associations of Latin America and the Caribbean. FLH advocates for the establishment of hospital associations in the countries that lack them and seeks to strengthen them where possible, so that they can effectively fulfill their mission. The organization works through collaboration and technical assistance with official bodies, as well as private organizations, collaborating in the improvement of medical care systems. It also collaborates with the social security system, and helps integrate subsectors (in networks) for the improvement of comprehensive health care and to facilitate the dissemination of knowledge about the administration of health programs.

18. The organization also works to promote the education and training of hospital staff and other health care workers, and cooperates in similar initiatives by national associations. Among other areas, it works to promote research aimed at improving know-how and problem-solving with regard to medical issues and hospital administration. It also promotes cooperation among different groups of professionals and administrators, linking health institutions for their advancement.
19. The federation’s work over the last four years, in the framework of the collaborative work plan includes the following activities, among others: a) within the context of integrated health services networks and in collaboration with PAHO, participation in the 2012-2015 congresses of the Argentine Chamber of Health-care Businesses (CAES); and b) participation in PAHO’s international meeting of experts on Advancing toward the Expansion of Equitable Access to Health Services, held in Washington, D.C. in July 2015.

20. During the next four years, PAHO and FLH will carry out the following activities: a) strategy on universal access to health and universal health coverage; b) dissemination of knowledge for the continuous improvement of health systems, and dissemination of recommendations; c) new developments and discussions on the continuous improvement of health systems in the Region; d) joint discussions between government institutions and private institutions on health issues, sustainable development, and equity; and e) training of health teams on management issues.

**Healthy Caribbean Coalition (HCC)**

21. The Healthy Caribbean Coalition (HCC) contributes and participates in all aspects of advocacy as a tool for influencing positive change around noncommunicable diseases (NCDs) through the mobilization of the Caribbean people and the creation of a mass movement aimed at responding to the NCDs. HCC works in the development of effective methods of communication for and among members of the Coalition and the people of the Region; builds capacity among health NGOs and civil society in the Region; contributes to NCD public education campaigns and programs; and, advocates and provides support for NCD risk factor reduction through: a) advocating for tobacco control and implementation of the Framework Convention on Tobacco Control (FCTC); b) promoting increased physical activity and improved dietary intake including reduction of salt and sugar, elimination of trans fats, and responsible alcohol use; c) supporting initiatives, plans and programs at country and organizational level, and d) advocating and supporting enhanced detection and management of chronic diseases.

22. The HCC 2012-2016 Strategic Plan supports the PAHO Strategic Plan and the Plan of Action for the Prevention and Control of NCDs in the Americas, and focuses on four strategic priority areas: advocacy; enhancing communication; capacity building; and Promoting mHealth and eHealth. The strategic objectives are to:

   a) contribute and participate in all aspects of advocacy as a tool for influencing positive change around NCDs through mobilization of Caribbean people and the creation of a mass movement aimed at responding to the NCDs;

   b) develop effective methods of communication for and among members of the Coalition and the people of the Caribbean region;

   c) build capacity among health NGOs and civil society in the region;
d) promote eHealth and mHealth to contribute to NCD public education campaigns and programs. These four strategic priority areas reflect that HCC is a regional alliance with the expressed purpose of adding value to civil society in the Caribbean and empowering people, specifically in the response to NCDs. It further reflects HCC’s mandate to encourage and foster the implementation of NCD projects and programs in-country, undertaken and led by regional civil society organizations.

23. Over the next four years HCC and PAHO have agreed to work collaboratively to support three of the four strategic lines of action in the PAHO Plan of Action for the Prevention and Control of Noncommunicable Diseases in the Americas 2013-2019 including; a) multi-sector policies and partnerships for NCD prevention and control; b) NCD risk factors and protective factors and c) health system response to NCDs and risk factors.

**Inter-American College of Radiology (CIR)**

24. The main activities of the Inter-American College of Radiology (CIR) focus on the following lines of action: a) education; b) scientific publications; c) communications; d) accreditation and certification of Ibero-American radiologists; and e) promotion of the safe use of ionizing radiation in medicine for patients, workers and the public, in accordance with national regulations and international standards. Each national association or college of radiology in the 24 Ibero-American countries that belong to CIR is represented by a delegate who has voice and vote in both ordinary and extraordinary assemblies of members.

25. During the last four years and in accordance with the CIR/PAHO collaborative work plan, the following activities were carried out:

a) Quality of health technologies and cancer control: Establish appropriate and agreed-upon standards and processes for quality assurance of mammography in Latin America and the Caribbean.

b) Celebration of World Radiology Day on 8 November 2013: This was an opportunity to raise the prominence of radiology on public health agendas and improve health authorities’ understanding of the role of radiology in addressing priority public health issues in the Region; and also, a side event at the 68th World Health Assembly (2015), which analyzed the global importance of safe diagnostic imaging in pediatrics and the action necessary to maximize its benefits and minimize the associated risks.

26. During the next four years, among other lines of action, CIR and PAHO propose to collaborate in the following activities:

a) improving the quality of health technologies and cancer control through the publication of quality standards for the mammography services. The purpose of
this activity is to establish standards and processes for quality assurance of mammography which are appropriate for Latin America and the Caribbean, agreed upon, and implemented in several countries;

b) implementing international basic safety standards (BSS) through the promotion of the safe use of ionizing radiation in medicine for patients, workers, and the public, in accordance with BSS;

c) improving the quality of diagnostic imaging in the Region through virtual and on-site courses on radiological practice.

**Latin American and Caribbean Women’s Health Network (LACWHN)**

27. The Latin American and Caribbean Women’s Health Network (LACWHN) is an organization that seeks to strengthen civil society organizations that participate actively in LACWHN in order to make progress in the promotion and defense of gender equality, health, and democratic governance in Latin America and the Caribbean.

28. LACWHN’s work is part of the collaborative work plan with PAHO. Over the last four years this has included the following actions, among others: a) training leaders of the movement and other civil society actors in the preparation of an action plan to promote public policies with gender equity; b) policy training: the Honduran “Itinerant University,” which foments women’s participation and strengthens their capacities in regional deliberation processes; c) participation in high-level regional events, such as “A Promise Renewed for the Americas,” a meeting aimed at reducing maternal and perinatal mortality, where a declaration was made from a civil society perspective; d) generation, analysis, and use of statistics and information based on gender, equity, and health, using the PAHO statistical brochure; e) coordination with PAHO and participation in the panel on “Information and communications technology—a tool for gender equity and equality at the Regional Women’s Conference; f) development of a regional communications strategy that incorporated new technologies and disseminated several PAHO news items and health information; and g) participation in the fifth meeting of the Technical Advisory Group on Gender Equality in Health (GEH/TAG), and in a health and gender panel at the International Meeting on Women and Health in the Dominican Republic.

29. During the next four years, LACWHN will pursue the following lines of collaboration within the framework of its agreements with PAHO, aligned with Category 3 of the PAHO Strategic Plan 2014-2019: Determinants of Health and Promoting Health throughout the Life Course, particularly in program areas 3.1. Women, Maternal, Newborn, Child, Adolescent, and Adult Health, and Sexual and Reproductive Health; 3.3. Gender, Equity, Human Rights and Ethnicity; and 3.4. Social Determinants of Health. Within these program areas, the following activities have been carried out: a) capacity-building in women and young people for sexual and reproductive health from a gender and human rights perspective; b) statistical documentation through monitoring of gender-related health indicators; c) participation in studies and activities aimed at revealing and analyzing gender-based inequalities in the Region; and d) support for the development of a political agenda for women in global and regional discussions.
**Interamerican Society of Cardiology (SIAC)**

30. The Inter-American Society of Cardiology (SIAC) brings together societies of cardiology in all the countries of the Americas for the advancement of cardiology, the promotion of research and education, and the association of physicians, surgeons, and specialized researchers in this field. Its main objective is to promote the best possible cardiovascular health in the population of the Region, through education and continuous professional development of its members.

31. In accordance with the work plan of the last four-year period, SIAC has, among other activities and in various settings, participated actively in the PAHO agenda aimed at reducing mortality and morbidity due to noncommunicable diseases (NCDs):

a) participation in the CARMEN Network conference, Transforming NCD Declarations into Actions (May 2012), and the Pan American Forum for Action on Noncommunicable Diseases, which positioned SIAC as the bridge between the academic sector and PAHO on subjects of cardiology;

b) two workshops were given on “Identification of a basic set of drugs to treat hypertension” and “Key elements of care in the medical treatment of hypertension.” The objective was to develop a framework to simplify drug treatment protocols, increase the availability of medicines, and improve the delivery of services to treat hypertension in Latin America and the Caribbean;

c) during the XXIV Inter-American Congress of Cardiology, a workshop was held on How to Accelerate the Implementation of Cardiovascular Risk Management in Health Services, with Emphasis on Combined Drug Therapy in People at High Risk;

d) participation in scientific conferences and workshops with member societies and other international organizations, giving presentations on secondary prevention and how to achieve the 25x25 target.

32. Relations between PAHO and SIAC have strengthened considerably during the past four years. The main lines of collaboration for the next four-year period will continue to focus on the prevention and control of cardiovascular disease, as follows:

a) continue the PAHO process of consultations on secondary prevention of cardiovascular diseases—one of the roadmaps of the World Heart Federation (WHF) toward the 25x25 target, which includes conducting a survey on cardiovascular risk factors every five years, specific guidelines on secondary prevention, and development of an online course on cardiovascular prevention;

b) continue to promote the priority agenda for cardiovascular health, within the framework of the 25x25 target, in all possible technical settings, as SIAC has been doing over the last four years;
c) work jointly to continue to expand the online course on management of hypertension in countries that have had low penetration, doing so within the framework of giving higher priority to the control of hypertension. This is one of the WHF roadmaps toward the 25x25 target;

d) work to expand the evaluation and management of cardiovascular risk and the use of the risk calculator.

**Progress Report**

33. By the deadline of 31 December 2015, one NGO had requested admittance into official relations with PAHO and has presented the required documentation. In addition, eight NGOs are scheduled to be reviewed. Each NGO has presented a report on results achieved in the period under review, as well as a draft collaborative work plan for the next four years, as specified in section 5.1 of the Principles.

34. Resolution CE144.R3 (2009) requests the Director to “submit an annual report on relations between PAHO and the nongovernmental organizations in official relations that would allow for the evaluation of the contribution of this collaboration to the strategic objectives defined by the Organization in the Strategic Plan 2008-2012.” The Annex includes a progress report on the status of ongoing relations between PAHO and those NGOs not being reviewed at this time.

**Proposal**

35. A concise supplementary background document will be provided for consideration by the Subcommittee, to be discussed in a closed session. The document will include the following:

a) basic information on each NGO to be admitted or renewed;

b) a report on collaboration over the past four years with each NGO to be renewed;

c) a work program for the next four years for each NGO.

**Action by the Subcommittee on Program, Budget, and Administration**

36. The Subcommittee is requested to review the documentation provided and instruct the Pan American Sanitary Bureau accordingly.

Annex
Annex

PROGRESS REPORT ON THE STATUS OF ONGOING RELATIONS BETWEEN PAHO AND THE NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO

American College of Healthcare Executives (ACHE)

1. The American College of Healthcare Executives (ACHE) is an NGO that seeks to advance their members and healthcare management excellence. Among many other activities with PAHO, the ACHE held the Meeting of the Global Consortium for Healthcare Management Professionalization convened at the Pan American Health Organization (PAHO) Headquarters in Washington, D.C., on 26-28 January 2015. The group also worked on how to pursue funding for future support of the document and the development of tools and resources. Representatives from the consortium met during meeting of the American College of Healthcare Executives’ Congress on Healthcare Management on 17 March 2015 in Chicago, Illinois. A second subgroup met by webinar to plan for a presentation on the directory at the International Hospital Federation (IHF) World Hospital Congress (October 2015). The presenters included the Chief Operating Officer (COO) of Tallaght Hospital in Dublin, who is also the Vice President of the Health Management Institute of Ireland; the Advisor on Hospital and Integrated Health Care Delivery/Health Services and Access of PAHO, and the President and CEO of the Canadian College of Health Leaders.

2. During the 39th IHF World Hospital Congress, held in early October 2015, the PAHO Advisor on Hospital and Integrated Health Care Delivery and Health Services and Access presented the directory and a call to action during the opening session. The session on Healthcare Leadership Competencies: A Global Perspective, was presented by the COO of Tallaght Hospital, the PAHO Advisor on Hospital and Integrated Health Care Delivery, and the President and CEO of the Canadian College of Health Leaders. The presentation’s learning objectives included: a) how to use the global competencies directory; b) how organizations may use the directory to guide development plans to improve patient delivery and care; and c) present a “Call to Action” that healthcare leaders and the profession can embrace. The final meeting of the consortium in 2015 was scheduled as a conference call on 18 December 2015.

Inter-American Association of Sanitary and Environmental Engineering (AIDIS)

3. The Inter-American Association of Sanitary and Environmental Engineering (AIDIS) organized the Inter-American Solid Waste Congress, which took place from 20-23 May 2015 in San Salvador, El Salvador. PAHO participated in the Congress and organized a keynote speech and a working group on hospital waste management during emergencies, with examples from the Ebola virus epidemic in Sierra Leone, Liberia, and Guinea; and on case management in Emory University Hospital in the United States. Emphasis was placed on the importance of expertise; the importance of a regional
diagnosis; the fact that management is specific to the size, specialization, and context of each health facility; the need for preparation, staff training, and institutional capacity; and the consideration due to the multiple stakeholders both within and outside health facilities.

4. As a result of this conference, AIDIS’s Solid Waste Division (DIRSA) is continuing its collaboration with PAHO on the important issue of waste management, which now includes epidemics and emergencies, recognizing that this work is being done in the broader context of water management, sanitation, and hygiene in health centers. With this in mind, seven DIRSA specialists from seven countries in the Region have been assigned to coordinate collaboration with PAHO within the framework of the current 2013-2016 work plan. Moreover, discussions have been initiated with PAHO’s regional technical team on water and sanitation for collaboration in the development of a protocol and model to evaluate water, sanitation, and hygiene practices in health facilities; the development of guidelines for surveillance and control of selected environmental health issues; and biosafety in health facilities. Furthermore, a learning event on this subject is being organized with PAHO’s participation, to be held in August 2016 in the framework of the Association’s emblematic biennial Inter-American Congress. At the Congress, AIDIS is also organizing a PAHO/WHO pre-congress seminar and a panel discussion on water and sanitation safety plans.

American Public Health Association (APHA)

5. During the 2015 calendar year, the American Public Health Association (APHA) collaborated with PAHO around several activities and projects. Both organizations continued holding their joint regular quarterly coordinating meetings under the leadership of PAHO’s Deputy Director and APHA’s Executive Director. APHA is particularly honored that PAHO’s Deputy Director accepted the nomination as the Association’s Honorary Vice-President for Latin America and the Caribbean for 2015-2016. Both organizations have continued to work cooperatively in terms of disseminating information as well as facilitating participation at each other’s annual events, including but not limited to, National Public Health Week, World Health Day, and Wellness Week. APHA participated at PAHO’s annual meetings of its Governing Bodies (the Executive Committee and the Directing Council). Building upon a long-standing partnership for the Spanish translation of the Control of Communicable Diseases Manual, PAHO and APHA recently finalized a mutually beneficial agreement for the new 20th edition. The dual language supplement coproduced by the American Journal of Public Health (AJPH) and the Pan American Journal of Public Health (PAJPH) continues to be successful in its visibility and impact.

6. PAHO and APHA have both supported the development of the Alliance of Public Health Associations for the Americas (APHAA, or the Alianza de Asociaciones de Salud Pública de las Américas [AASPA]). The first meeting of APHAA/AASPA was held in conjunction with the 2nd Cuba Salud conference in Havana. At the recent APHA 143rd Annual Meeting in Chicago, PAHO organized two scientific sessions that addressed the challenge for health systems in tackling noncommunicable diseases and
mental health; and a second session that discussed the synergies between the Sustainable Development Goals (SDGs) and Health in All Policies (HiAP) in the Americas. PAHO’s Deputy Director was invited to speak separately at two additional sessions that APHA coorganized, one on the Alliance of Public Health Associations in the Americas and the other on the role of women leaders in global health. PAHO screened two films that were accepted as part of APHA’s Global Public Health Film Festival, also held during the conference. The films highlighted the importance of food safety across the process from production to consumption; and the implementation of regional public health initiatives to improve the accessibility of services in a rural area of Paraguay.

**American Speech-Language Hearing Association (ASHA)**

7. The American Speech-Language Hearing Association (ASHA) is collaborating with the PAHO Disability and Rehabilitation program providing technical cooperation and capacity-building to organizations and/or institutions in selected countries addressing rehabilitation of communication disorders.

8. For Central America, ASHA provided technical support to the *Universidad Nacional Autónoma de Honduras* (UNAH) as it develops a professional preparation program in phonoaudiology. UNAH has obtained approval from university authorities for the development of a phonoaudiology program. The ASHA ad hoc committee members were instrumental in facilitating the review and development of the curriculum, including state-of-the-art training content to enable appropriate service delivery by trained clinicians. Ad hoc committee members participated in the training for new faculty to discuss unification of terminology, criteria, and approaches for the implementation of the new career. In El Salvador, ASHA provided technical support to the *Instituto Salvadoreño de Rehabilitación Integral* (ISRI) to strengthen human resources engaged in rehabilitation of communication disorders. Currently, the ASHA ad hoc committee members assisted the ISRI in developing a training plan based on the needs of professionals providing services to children and adults with hearing loss. Four major areas are as follows: preparation of professionals in family-centered intervention; development of the capacity to obtain amplification for newly identified infants with hearing loss; development of assessment and management services in vestibular issues; and, development of a training program in communication sciences. A comprehensive educational resource package was produced in Spanish and sent to ISRI as a sustainable tool for training its professionals in communication rehabilitation.

9. For South America, ASHA provided technical support to the Ministry of Health of Guyana to strengthen its national strategic plan for early detection and intervention in communication disorders. The ASHA ad hoc committee members are providing technical assistance to the Guyana Ministry of Health and the University of Guyana; they reviewed and updated the medical rehabilitation assistant curriculum and developed a speech-language therapy/audiology curriculum. The University of Guyana approved the proposal in April 2015. The ad hoc committee assists with recruitment of volunteer faculty and procedures for evaluating students during clinical practice.
10. Looking forward in 2016, the ASHA-PAHO collaboration will expand its work program to three new countries: Cuba, Ecuador, and Paraguay.

**American Society of Microbiology (ASM)**

11. The American Society of Microbiology (ASM) seeks to strengthen the professional development and microbiology laboratory capacity in Latin America and the Caribbean. In 2015, ASM developed the following programs to help facilitate the implementation of the ASM-PAHO work plan 2014-2016 which included:

a) expansion of the ASM Virtual Speaker Program, including five new virtual lectures in 2015. Through the Virtual Speaker Program, ASM and PAHO can connect the universities and scientific societies in PAHO’s Member States with renowned experts from the American Academy of Microbiology;

b) implementation of the updated Scientific Writing and Publishing Workshop in El Salvador, Guyana, Jamaica, Mexico, Paraguay, and Uruguay. Workshop materials have been translated into Spanish by the ASM Country Ambassador to El Salvador;

c) establishment of ASM Student Chapters in Brazil, Canada, and Paraguay to engage the next generation of scientists. ASM Student Chapters organized a wide range of activities, including exam review sessions, workshops on science communication, presentations on microbiology to high school students, and writing a blog on a variety of science topics;

d) ASM’s *Cultures* magazine filmed and produced a digital video production of a food security initiative in collaboration with the Universidad Nacional de Colombia and the University of Lausanne. The video seeks to help stakeholders harness the symbiotic nature of arbuscular mycorrhizal fungi to enhance worldwide cassava production;

e) enhanced network of ASM ambassadors to facilitate in-country activities with new appointments in Brazil, Panama, Saint Kitts and Nevis, and Uruguay.

**Consumers International-Regional Office for Latin America (CI-ROLAC)**

12. In 2015 Consumers International (CI) continued its campaign calling for a Global Convention to Protect and Promote Healthy Diets, which began in 2014, by participating in a side event organized by BRICS 1 countries during the WHO World Health Assembly. CI was also present during the 54th PAHO Directing Council meeting. 2 In line with CI’s work plan for WHO, a side event was organized during their recent world congress, held in Brasilia, showing the importance of food safety and the activities of CI’s member organizations around World Health Day, with this year’s theme of food safety. As part of

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1 Brazil, Russia, India, China, and South Africa.

2 CI was represented by the director of *El Poder del Consumidor* (a consumer organization in Mexico and member of CI).
the ongoing activities and participation in the Technical Advisory Group on Salt Reduction, CI supported the Spanish language communication before and during World Salt Awareness Week 2015 through the Acción Latinoamericana de Sal y Salud (ALASS) website, the twitter account, and during a webinar.

13. CI member organizations were invited to participate in World Salt Awareness Week activities. CI participated actively in a final review meeting of phase 2 of the Technical Advisory Group (Washington) and the 4th SaltSmart Consortium Meeting (Antigua), both in September. CI continued to gather information about legislative activities in Latin America regarding salt reduction, as well as initiatives on the reduction of noncommunicable diseases (NCDs), for internal use and to share with their member organizations in the Region. Looking forward to 2016, CI-ROLAC plans to continue supporting and sharing PAHO materials and work regarding dietary salt reduction around World Salt Awareness Week 2016 and other relevant events, providing translations into Spanish and Portuguese of World Salt Awareness Week communications and for the World Action on Salt and Health (WASH) posters, maintaining the ALASS website up-to-date, and developing project proposals on food safety (together with FAO) and food labelling combined with salt reduction.

Latin American Confederation of Clinical Biochemistry (COLABIOCLI)

14. During the last three years, among other activities, the third edition of the Quality Management and Good Laboratory Practices course was completed; the fourth Quality Management and Good Laboratory Practices course was organized and the computer platform for this course was also organized. The Guidelines for the Preparation of Clinical Laboratory Accreditation Manuals for Latin America were reviewed; the Clinical Laboratory Quality System Checklist was prepared, based on ISO standard 15189-2012; the Latin American Handbook for the Implementation of the Code of Ethics in Health-care Laboratories was reviewed and edited, and tools were updated for the implementation of quality management systems. Through mediation by COLABIOCLI, a cooperation agreement was signed on 25 September 2015, in Quito, Ecuador, by the National Public Health Research Institute (INSPI) of Ecuador and the Argentine Biochemistry Foundation for collaboration on the implementation of an External Quality Evaluation Program for Ecuador’s public hospital laboratories.

15. The XXII Latin American Clinical Biochemistry and Laboratory Sciences Congress (COLABIOCLI 2015) was held in the city of Quito from 24 to 26 September 2015. Professionals from COLABIOCLI’s 22 member countries participated, with scientific support from 70 foreign speakers and 30 prestigious Ecuadorian professionals. During the 2015 COLABIOCLI Congress, the 5th University Forum was held with the participation of representatives from Latin American and Caribbean universities. The agenda included curricular content, accreditation of degrees, academic mobility, and

3 CI celebrates World Consumer Rights Day every year on 15 March, almost always coinciding with World Salt Awareness Week.
strengthening of the Latin American network of training schools that grant degrees in biochemistry or equivalent titles. The COLABIOCLI Executive Committee held its General Assembly on 25 September, submitting its activities report for 2013-2015; elections were also held, with the Uruguayan delegation assuming the presidency.

**World Resources Institute Centre for Sustainable Transport (EMBARQ)**

16. The main activities that the World Resources Institute (EMBARQU) and PAHO have undertaken between January and December include the following categories:

a) *Cities Safer by Design*. A global reference guide was published to help cities save lives from traffic fatalities through improved street design and smart urban development.

b) *Impacts of Reduced Speed Limits in Urban Areas*. A guide on the importance and management of speed in urban areas was published.

c) *The effect of bus rapid transportation (BRT) Implementation on Physical Activity*. A methodology was developed to measure the impact of BRT implementation on physical activity of catchment area residents in Mexico City.

d) *Road Safety Audits/Inspection*. Audits and inspections were carried out in Brazil, Colombia, India, Indonesia, Mexico, Thailand, Turkey, and Vietnam, among others. Reports were developed to outline findings as well as recommended street design changes.

e) *Workshops*. Numerous workshops of different sizes and topics have taken place. The main goal of the workshops is capacity-building of local counterparts.

**The Latin American Federation of the Pharmaceutical Industry (FIFARMA)**

17. Among other activities, the Latin American Federation of the Pharmaceutical Industry (FIFARMA) reported on the following activities between January and December 2015, corresponding to the FIFARMA/PAHO action plan: Participation in the meeting of the Directing Council of the Pan American Network for Drug Regulatory Harmonization (PANDRH), held from 26 to 27 May 2015 in Washington, D.C. FIFARMA also participated in the ad hoc working group formed within the PANDRH Directing Council for new governance of the Network. Work was done on the final draft of the new statutes for governance of the Network; the members were Brazil, Colombia, Guatemala, Mexico, and the United States of America, in addition to one representative of ALIFAR, one of FIFARMA, and one of the PANDRH Secretariat. The draft document was presented and approved in May at the meeting of the Network’s Directing Council. FIFARMA staff members worked throughout 2015 in the following PANDRH working groups: biotechnology products, good clinical practice, drug surveillance, vaccines, and good laboratory practices. FIFARMA updated its participation in each group, contributing top-tier technical experts to each group.
18. FIFARMA also participated in the 156th session of the Executive Committee of PAHO, held in Washington, D.C., from 22 to 26 June 2015; in the 54th Directing Council of PAHO, held in the same city from 28 September to 2 October 2015; and in the Regional Regulatory Workshop on the Batch Release of Vaccines, held in Santiago, Chile, from 27 to 29 October 2015, and also organized by PAHO.

**Framework Convention Alliance on Tobacco Control (FCA)**

19. The Framework Convention Alliance on Tobacco Control (FCA) has participated in a long list of joint efforts such as 

   a) distribution of materials, one-on-one contacts with stakeholders, and promotion of the recommendations in support of the Framework Convention on Tobacco Control (FCTC) Working Group on Sustainable Measures; 

   b) support to the 1st meeting of the Expert Group for the revision of the FCTC reporting instruments; 

   c) support and participation in the Central American Workshop to promote the Protocol on Illicit Trade of Tobacco Products; 

   d) coordination with PAHO and other partners to define actions and strategies in Chile (amendment of tobacco control legislation) and Peru (support a bill for a total advertising ban), among others; 

   e) support and collaboration for the South-South and Triangular Cooperation Meeting in Montevideo, Uruguay. FCA has also supported Panama in the use of the Trading Standards Institute (TSI) side-pack for determination of particulate matter, and collaborated with Uruguayan NGOs to develop a project to implement the protocol.

20. FCA has worked to integrate tobacco control in the NCDs agenda with the following activities: 

   a) support and contribution to the preparations for the Regional Meeting of the Healthy Latin American Coalition (Panama, June 2015); 

   b) participation in the Pan-American Forum on NCDs; 

   c) advocacy for the integration of tobacco control and FCTC in the post-2015 Development Agenda; and 

   d) creation of an advocacy toolkit on tobacco control and the SDG targets, among others. FCA contributed to the multiple successes like the recognition of FCTC as one of the “means of implementation” to reach the overall health goal (SDG3) and the reference to tobacco taxation in the Addis Ababa Action Agenda.

**Inter-American Heart Foundation (IAHF)**

21. Over the last four years, among other activities, the Inter-American Heart Foundation (IAHF) has continued to implement the Framework Convention on Tobacco Control in the Latin America and the Caribbean region by using tools for implementing the FCTC Article 14 Guidelines (available at [www.treatobacco.net](http://www.treatobacco.net)). IAHF has continued working with the ministries of health in Bolivia, Costa Rica, Mexico, and Uruguay to conduct a National Situation Analysis (NSA) and develop a consensus-based National Strategy for Tobacco Dependency Treatment. Uruguay has already developed its strategy, which is a major change from its previous one; Bolivia and Costa Rica have drafts to be approved momentarily; and, Mexico is in the process of conducting its own NSA. Bolivia has also written draft Treatment Guidelines. IAHF has also obtained a Global Bridges grant to provide sustainable cessation training for health professionals; has developed a “train the trainer” program; and, has signed institutional agreements with
commitments for institution-wide capacity-building. Planning is underway for the 5th Latin American and Caribbean Tobacco or Health Conference that will take place in Montevideo, Uruguay, on 4-7 April 2017. Studies have been carried out in areas related to production, retailing, and policy regarding the tobacco economy in Argentina. A paper on affordability of tobacco in Argentina was published in PAHO’s Journal.

22. The Foundation has also supported PAHO’s Plan of Action to Prevent Obesity in Childhood and Adolescence. On this subject, during 2015, IAHF supported the growth of the Healthy Latin America Coalition (CLAS, for its acronym in Spanish), helped develop national coalitions in several countries, and engaged in addressing obesity issues. IAHF led an effort in support of PAHO’s obesity action plan, and has contributed to efforts with Consumers International and World Obesity. IAHF sent responses to the WHO Commission on Ending Childhood Obesity (ECHO) and the WHO Commission on Non-State Actors. In addition, IAHF sent correspondence to the Minister of Health of Peru, regarding advancing regulations on nutrition law and to Mexican congressmen about attempts to reduce sugary drink taxes. IAHF held regular meetings of CLAS advocacy to support actions in countries. IAHF has also expanded its advocacy efforts to advance the prevention and control of NCDs. IAHF mobilized resources and organized the 2015 Regional NCD Workshop in Panama, on 8-10 June 2015.

International Diabetes Federation (IDF)

23. The International Diabetes Federation (IDF) has been in official collaboration with PAHO since 1995. In 2015, the IDF and PAHO collaborated on several projects such as the scientific evaluation of national diabetes guidelines and protocols. The regional councils of North America, South America, Central America, and the Caribbean, as well as national diabetes associations contributed to the PAHO study on the costs of diabetes. A regional conference on diabetes and pregnancy was held in Lima, Peru, with the collaboration and active participation of the regional councils and national associations. National diabetes associations of the IDF have contributed to the implementation of projects to improve the quality of care for diabetes; and implementation of the “Passport to a Healthy Lifestyle” in Honduras, Panama, and Paraguay, among other countries.

Latin American Society of Nephrology and Hypertension (SLANH)

24. Joint activities with the Latin American Society of Nephrology and Hypertension (SLANH) focus on achieving the agreed goals of the two entities with a view to improving diagnosis, treatment, survival, and quality of life of patients with kidney disease in the Region. These goals consist of obtaining, in each country, reliable records of the number of patients with chronic kidney disease (CKD) and those receiving dialysis or a kidney transplant; increasing the proportion of patients with CKD in renal replacement therapy by reducing the number of patients without access to this treatment; increasing the number of available nephrologists; and, finally, improving the diagnosis, conditions, and treatment of patients with CKD of nontraditional causes in the Central American region.
25. Given the need to address emerging problems in the countries of the Region and to strengthen the development of national registries, the second training and certification course for national managers of national dialysis and transplantation registries was held in June 2015 for the countries of the Andean Region, among other actions. Representatives of the ministries of health and nephrology societies of these countries participated in the training, which was co-financed by PAHO and SLANH. Work was begun to organize the renal health course for primary care physicians, to be offered with free, online access starting in March 2016. PAHO sponsored the interactive online course on acute kidney injury organized by SLANH between August and October 2015, for medical nephrologists and specialists in fields associated with nephrology and other related disciplines. A total of 912 professionals from 21 countries participated.

March of Dimes

26. Among many collaborative actions between both organizations, in 2015, the March of Dimes and PAHO advanced their collaborative initiative to improve neonatal screening (NBS) across the Latin American region. The project, which addresses in particular conditions prevalent in the Region—e.g., phenylketonuria (PKU), congenital hypothyroidism, sickle cell disease, congenital adrenal hyperplasia, cystic fibrosis, and congenital hearing loss, among others—generated a regional map showing which countries currently have newborn screening programs and the conditions screened for. It will be sent to PAHO in early February for final review. A second paper summarizing the findings of the country review (i.e., which countries are screening for what conditions), describing in detail the methods used, and providing a regional map of conditions screened by country, is currently being finalized by PAHO in consultation with partner countries and will be sent to the March of Dimes for review and final input. Both papers will be submitted for publication in peer-reviewed journals by June. The first draft of a third paper addressing the economic costs of screening (as well as the costs of not screening in terms of medical and long-term productivity costs) is being prepared by PAHO for joint review by the March of Dimes. Plans call for submission of this paper for publication later in 2016.

27. During 2015 the March of Dimes and PAHO also continued their partnership on a second project that begun in 2014 with the purpose of increasing awareness of the economic costs of preterm births in Latin America. Its goal is to identify opportunities for strengthening prevention and care of prematurity and provide an analytic economic model that could be replicated in a similar review in other WHO regions. The project draws on initial country estimates of preterm birth rates and associated mortality in Latin America published in the 2012 March of Dimes-WHO-Partnerships for Maternal, Newborn, and Child Health-Save the Children report, “Born Too Soon.” These estimates were augmented in 2015 by other data sources, including updated regional and country estimates of preterm birth incidence and economic costs provided by PAHO. A health economist at the U.S. Centers for Disease Control and Prevention was identified and has agreed to work with the PAHO-March of Dimes team in developing an economic model for generating estimates of the projected costs of preventive interventions and care of the
affected newborn, as well as the costs of inaction. The project findings will be written up for submission to 2-3 publications in peer-reviewed journals in 2016 and will provide the basis for a future technical meeting convened by PAHO with the goal of accelerating prevention and care in the Latin American region.

**National Alliance for Hispanic Health (NAHH)**

28. The National Alliance for Hispanic Health (NAHH) has continued to work closely in several collaborative efforts with PAHO’s technical focal points from the Noncommunicable Diseases and Mental Health entities through the “Buena Salud Americas” Initiative. The Alliance established this initiative with the purpose of joining forces with PAHO to promote and support multi-sector collaboration in the prevention and control of NCDs. The common goal is to achieve health for all in the Region of the Americas. For the current reporting period, the Alliance worked with advisors from the PAHO cardiovascular diseases and nutrition programs in the planning of the second joint leadership meeting of the “Buena Salud Americas” Initiative. This meeting followed the inaugural “Buena Salud Americas – Community Initiatives for Cardiovascular Health” meeting that was held in Bogota, Colombia in 2013, in partnership with the Ministry of Health of Colombia.

29. The 2015 “Buena Salud Americas” leadership meeting that took place in Mexico City, Mexico, was organized by the Alliance and PAHO, with support from the Healthy Americas Foundation and in partnership with Mexico’s Ministry of Health. Other partner agencies included the American Cancer Society, Change Lab Solutions, and the New York City Health Department. The focus of the 2015 joint leadership meeting was to help build the capacity of community-based organizations and civil society groups in the Americas to engage in advocacy to promote policies and systems that affect public health policy and promote community engagement. Participants to the meeting included government officials and representatives from NGOs from across the Americas. The two-day meeting featured presentations on the current state of preventing and controlling obesity and diabetes in the Americas; the United States and Mexico experience with soda taxes and serving size legislation; Chile, Costa Rica, and Ecuador’s experience with food and nutrition policy, and building partnerships between governments and NGOs and civil society. The Alliance continues to participate in PAHO’s Pan American Forum for Action on Non-Communicable Diseases (PAFNCDS) activities.

**Sabin Vaccine Institute (Sabin)**

30. The Sabin Vaccine Institute (Sabin) continues to support the development of the PAHO-Sabin work plan focused on training and advocacy initiatives concerning immunization and the introduction of new vaccines in the Region of the Americas. The Sabin Vaccine Advocacy and Education Program frequently partners with PAHO on various symposia, training courses and other gatherings. In addition, PAHO and Sabin are currently working on a number of research studies across a variety of diseases. Current projects include:
a) partnership with PAHO to strengthen pertussis surveillance in Latin America. Collaborative efforts are focused on expanding laboratory capacity for confirming B. pertussis, developing standards and practices for pertussis surveillance, and gaining a greater understanding of the burden of pertussis in Latin America;

b) collaboration with PAHO on meningococcal disease and adult pneumococcal disease advocacy in Latin America, focusing on regional symposia, research and awareness in the region;

c) partnership with PAHO to continue assessing the impact and effectiveness of pneumococcal conjugate vaccines (PCV) on hospitalizations and deaths due to childhood pneumonia, following PCV’s introduction into the national immunization programs; and

d) PAHO/Sabin collaborative work on the ProVac Initiative.4

United States Pharmacopeial Convention (USP)

31. PAHO and the United States Pharmacopeial Convention (USP) concluded the Step XI of the performance evaluation phase of the External Quality Control Program (EQCP), a collaborative program initiated in 2001. Twenty-five member laboratories of the Pan American Network of Official Medicines Control Laboratories (OMCLs) participated in this round of the EQCP, analyzing Ethambutol Hydrochloride tablets (a WHO essential anti-tuberculosis medicine) according to compendial standards. Inter-laboratory testing results and individual evaluation reports for each participating laboratory were released from USP through PAHO in August 2015. EQCP and other collaborative actions led by PAHO/WHO in recent years toward strengthening the Network of OMCLs in the Americas have been captured in a descriptive study (in Spanish) submitted for publication to the Pan American Journal of Public Health in 2015. During the period under review, PAHO and USP continued to collaborate in offering technical assistance and guidance with pharmacopeia standards. In consultation with PAHO, USP provided complimentary copies of the annual Spanish Edition of the USP-NF to national regulatory authorities and OMCLs in Latin America and the Caribbean in an effort to support their regulatory and compendia-related activities. Copies of the USP-NF in English have also been provided to non-Spanish speaking countries in the Region. The translation of USP-NF standards into Spanish continued to be guided and monitored by an Expert Panel of volunteer experts from several Latin American countries, including a representative from PAHO.

32. In the framework of the Promoting the Quality of Medicines (PQM) program—a cooperative agreement between USAID and USP—several collaborations with PAHO

4 ProVac provides technical support to decision-makers and strengthens national capacity to conduct economic analyses and make evidence-based decisions for the introduction of new vaccines. The Initiative was established by the Pan American Health Organization (PAHO) in Latin America and the Caribbean in 2006 and has provided support for the evaluation of pneumococcal, rotavirus, and HPV vaccines in over 14 countries.
were materialized, including the review and development of documents emanating from the workshop to explore sustainable mechanisms for South-South collaborations delivered to National Regulatory Agencies (NRAs) and OMCLs in Lima, Peru, in November 2014, including surveillance forms to assess NRAs’ and OMCLs’ needs and capabilities, and a concept note delineating the meeting’s conclusions and recommendations for follow-up activities; coordination of meetings by PAHO/Brazil representatives with Brazil’s National Malaria Control Program; and, participation in discussions about PQM activities in Brazil, among many others.

*World Association for Sexual Health (WAS)*

33. The World Association for Sexual Health (WAS), in keeping with the current WAS-PAHO quadrennial work plan, has carried out a number of activities throughout 2015. Among them, WAS and PAHO collaborated in the dissemination of tools and documents for the provision of care to key populations. An example is the development of a new blueprint for the provision of comprehensive care for trans persons and trans communities. This was developed in the Asian Pacific Region, as a result of the collaboration with WAS members. This new publication was based on PAHO’s blueprint for the provision of comprehensive care for trans people and trans communities.

34. Lines of collaboration between the two institutions included:

a) *Advocacy:* WAS held this year its 21st World Congress in Singapore. During this event, WAS continued to disseminate and advocate for PAHO’s resolution on equitable access to care for lesbian, gay, bisexual, and trans (LGBT) persons. This was possible due to the wide recognition and importance that the PAHO document has among the WAS membership.

b) *Promotion of Sexual Health and development of Public Policies:* PAHO continued to provide technical assistance mainly through the collaboration and valuable inputs of the PAHO Human Rights Advisor and the Senior Advisor on HIV/STI and Hepatitis. This collaboration included the development of the technical document that supports WAS’s new Declaration of Sexual Rights.
SCHEDULE OF SPBA REVIEWS OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO
(as of 1 January 2016)

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