NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

Introduction

1. At the 55th Directing Council, the PAHO Member States adopted the Framework of Engagement with non-State Actors (FENSA) via Resolution CD55.R3 (September 2016). Through this Resolution, the PAHO Member States specifically replaced the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations with FENSA. They also requested the Director to implement FENSA in a manner consistent with the PAHO constitutional legal framework and report annually to the Executive Committee through its Subcommittee on Program, Budget and Administration.

2. “Official relations” is a privilege that the Executive Committee may grant to nongovernmental organizations, international business associations, and philanthropic foundations that have had and continue to have a sustained and systematic engagement with PAHO for at least two years that is assessed by both parties as being mutually beneficial. Entities in official relations should be regional in membership and/or scope and have a constitution or similar basic document, an established headquarters, a governing body, and an administrative structure.

3. Official relations are based on a three-year plan for collaboration with PAHO that has been developed and agreed on jointly by the non-State actor and PAHO. The three-year plan is structured in accordance with the PAHO Strategic Plan and is consistent with FENSA. The plans shall be free from concerns that are primarily of a commercial or for-profit nature.

---

1 Resolution CD55.R3 (September 2016).
2 Id.
3 Entities were previously reviewed on a four-year cycle under the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations, which has now been adjusted to a three-year plan under FENSA.
4. In assessing new applications or reviewing non-State actors that wish to continue maintaining official relations, the Bureau will conduct due diligence to identify which of the four specific policies included in FENSA (i.e., those related to nongovernmental organizations, private sector entities, philanthropic foundations, or academic institutions) applies to each non-State actor. If a non-State actor no longer qualifies for official relations, the Bureau will contact the non-State actor to allow it to decide if it would like to adjust its policies, governance, or funding in a manner that would allow it to qualify again. Otherwise, the Bureau will propose the discontinuation of official relations with the entity. The Bureau will also weigh the benefits and risks associated with each non-State actor and recommend establishing or maintaining official relations status only if the benefits outweigh any residual risks.

Applications of NSAs for Admittance into Official Relations with PAHO

5. The Executive Committee, through its Subcommittee, is responsible for deciding on the admission of organizations into official relations with PAHO. This year the Bureau received no notifications by the deadline of 31 December 2016 from any non-State actor requesting admission to receive the status of official relations with PAHO.

Review of Collaboration with non-State Actors in Official Relations with PAHO

6. The Executive Committee, through its Subcommittee, is responsible for reviewing PAHO collaboration with each NSA in official relations every three years and deciding on the desirability of maintaining official relations or deferring the decision on the review to the following year. The Executive Committee may discontinue official relations if it considers that such relations are no longer appropriate or necessary in light of changing programs or other circumstances. Similarly, the Executive Committee may suspend or discontinue official relations if an organization no longer meets the criteria that applied at the time of the establishment of such relations, fails to provide updated information or report on the collaboration, or fails to fulfill its part in the agreed program of collaboration.

7. Currently there are 27 non-State actors in official relations with PAHO. The Bureau will conduct an assessment of these entities when each is up for renewal of its official relations status. Thus, approximately one-third of the non-State actors will be assessed each year. Eight entities are up for renewal this year: the American Public Health Association; the American Society for Microbiology; the Inter-American Association of Sanitary and Environmental Engineering; the International Diabetes Federation; the Latin American Federation of the Pharmaceutical Industry; the March of Dimes; the United States Pharmacopeial Convention; and the World Association for Sexual Health.

---

8. To support the Executive Committee’s review, the Bureau has examined and assessed each entity to ensure that the established criteria and other requirements have been fulfilled in accordance with the provisions set out in FENSA. Due diligence has been conducted on each non-State actor and the relevant supporting documentation provided has been reviewed, permitting the Bureau to categorize each non-State actor on the basis of its nature, objectives, governance, funding, and membership. The Bureau has also assessed the benefits and risks associated with each non-State actor, thus ensuring that the benefits to public health and/or the fulfilment of the Organization’s mandate in each case outweigh any residual risks. Finally, reports on collaboration during the past three years (2014–2016) and on the jointly agreed plans for collaboration over the next three years (2017–2019) have been examined.

9. Based on its review of these eight entities, PASB has reached the following conclusions:

a) It recommends continuation of official relations with six of the entities: the American Public Health Association; the American Society for Microbiology; the Inter-American Association of Sanitary and Environmental Engineering; the March of Dimes; the United States Pharmacopeial Convention; and the World Association for Sexual Health.

b) In order not to compromise existing collaboration and to offer time to elaborate a more robust plan of collaboration, it proposes that the decision on the Latin American Federation of the Pharmaceutical Industry be deferred until the 12th Session of the Subcommittee on Program, Budget, and Administration of the Executive Committee.

c) It proposes discontinuation of official relations with the International Diabetes Federation in light of lack of collaboration over the past two years.

10. A concise supplementary background document on entities recommended for continuation will be provided for consideration by the Subcommittee. It will include basic information on each of the six non-State actors for which renewal is being considered, as well as a report on the collaboration of each of them over the past three years and a program of work for the coming three years.

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

11. The Subcommittee is invited to consider commending the following six non-State actors for their continuing contribution to the achievement of PAHO objectives and to recommend to the Executive Committee that it decide to maintain them in official relations with PAHO: the American Public Health Association; the American Society for Microbiology; the Inter-American Association of Sanitary and Environmental Engineering; the March of Dimes; the United States Pharmacopeial Convention; and the World Association for Sexual Health.
12. The Subcommittee is invited to note the report, and consider recommending to the Executive Committee, deferring the decision for maintaining official relations with the Latin American Federation of the Pharmaceutical Industry until 2018.

13. The Subcommittee is invited to consider to recommend to the Executive Committee discontinuing official relations with the International Diabetes Federation.

Annexes
Annex A

REVIEW OF COLLABORATION WITH NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

1. PASB recommends continuation of official relations status for the following non-State actors:

*American Public Health Association (APHA)*

2. The American Public Health Association (APHA), founded in 1872, is an organization for professionals in the field of public health and allied professions primarily based in the United States. The mission of the APHA is to improve the health of the public and achieve equity in health status. The Association’s vision is to create the healthiest nation in one generation. Its values reflect the beliefs of its members from all public health and related disciplines in over 40 countries.

3. Over the last three years, the following activities were carried out under the APHA/PAHO collaborative work plan:

a) APHA Annual Meetings. At each of the past three Annual Meetings, PAHO and APHA coordinated the following activities to highlight the longstanding partnership between the two organizations: *i*) two scientific sessions, co-hosted by the two organizations, highlighting public health issues faced in the region; *ii*) presentation of a PAHO exhibit at the Public Health Expo; and *iii*) submission of films to the Global Public Health Film Festival.

b) Translation project. Publication of translated articles in scientific journals and translation of the updated version of the *Control of Communicable Diseases Manual*. Since 2014, the *American Journal of Public Health* (AJPH) and the *Pan American Journal of Public Health* have partnered on the translation into Spanish of selected English-language peer-reviewed articles. Also, under a subsidiary agreement, other articles were translated into Spanish, published, and disseminated. In addition, the two organizations renewed an agreement for the Spanish translation of the latest edition of the *Control of Communicable Diseases Manual* (21st edition), which includes a new chapter on Zika.

c) Ad hoc activities, communications, and other collaborative partnerships. *i*) Engagement in the coordination and planning of activities related to National Public Health Week and World Health Day; *ii*) support for development of the Alliance of Public Health Associations of the Americas (APHAA/AASPA); and *iii*) coordinated communication to share opportunities and resources through the networks of the two organizations.
4. The following activities are proposed for the next three years under the APHA/PAHO collaborative work plan:

a) APHA Annual Meetings. At every Annual Meeting, both PAHO and APHA will work together on the following activities: i) Co-hosting of two scientific sessions; ii) presentation of a PAHO exhibit at the Public Health Expo; and iii) participation in the Global Public Health Film Festival.


c) Ad hoc activities. i) Coordination of activities related to National Public Health Week and World Health Day, both of which are held each year in the first week of April; ii) Alliance of Public Health Associations of the Americas; iii) U.S.-Cuba relations and health; iv) coordination of communication, including dissemination of opportunities and resources via e-newsletters and social media, and trainings/webinars.

American Society for Microbiology (ASM)

5. The American Society for Microbiology brings together more than 47,000 scientists and health professionals. Founded in 1899, the ASM has grown into the largest life science professional organization in the world. Its mission is to promote and advance the microbial sciences. ASM advances the microbial sciences through conferences, publications, certifications, and educational opportunities. It enhances laboratory capacity around the globe through training and resources. It provides a network for scientists in academia, industry, and clinical settings. In addition, the ASM promotes a deeper understanding of the microbial sciences for diverse audiences.

6. The following activities were carried out over the last three years under the ASM/PAHO collaborative work plan:

a) Professional development workshops. Multiple ASM Scientific Writing and Publishing Workshops were implemented in Guyana, El Salvador, and Paraguay.

b) Virtual scientific lectures. Through the Virtual Speaker Program, the ASM and PAHO are able to connect universities and scientific societies in the PAHO Member States with renowned experts from the American Academy of Microbiology.

7. The following activities are proposed for the next three years under the ASM/PAHO collaborative work plan:

a) Professional development workshops. ASM will build on previous collaborative activities to implement a series of workshops on Best Practices in Scientific
Writing and Publishing and the Art of Science Communication using a blended virtual/onsite format.

b) Virtual scientific lectures. The ASM will leverage the expertise of its membership to expand the number of virtual speakers at scientific meetings and workshops throughout the PAHO region.

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

8. The Inter-American Association of Sanitary and Environmental Engineering is a nonprofit technical and scientific society that brings together leading professionals dedicated to environmental conservation, environmental health, and basic sanitation in the Americas. The Association’s main fields of work include raising awareness of environmental, health-related, and basic sanitation issues by proposing policy alternatives and solutions; maintaining close contact with the governments in the Region to seek the implementation of plans to improve health-related conditions associated with the environment and basic sanitation deficiencies; organizing capacity-building events; and building strategic alliances with universities and other learning institutions.

9. The two organizations participated jointly in the following activities over the last three years, among others, under the AIDIS/PAHO collaborative work plan:

a) Water and Sanitation Symposium: “Increasing Access to Quality and Reducing Inequities” (Monterrey, Mexico, October 2014). The Symposium was an example of successful joint coordination and broad participation, as it was attended by 50 participants.

b) AIDIS/PAHO Regional Symposium, "Water and Sanitation in the 2030 Agenda: The Road to Sustainable Development" (Cartagena, Colombia, August 2016).

c) AIDIS/PAHO project “Design and Use of an Evaluation Protocol for Water, Sanitation, and Hygiene in Health Care Facilities”.

d) AIDIS/PAHO Hospital Waste Panel, held at the VI Inter-American Congress on Solid Waste (San Salvador, El Salvador, May 2015).

e) 13th AIDIS High-Level Technical Meeting (São Paulo, Brazil, July 2016), including a panel, “Atmospheric Pollution and the Challenges of Megacities,” organized with PAHO participation.

10. The following activities are proposed for the next three years under the AIDIS/PAHO collaborative work plan:


c) Training of emergency and disaster response teams on topics related to water and sanitation.

d) Preparation of a joint AIDIS/PAHO technical manual on disasters and emergency response in areas related to water and sanitation.

e) Collaboration on implementation of the WHO Roadmap for Air Quality.

f) Actions in support of the Breathe Life project to alert people about the dangers of air pollution from various sources.

g) Collaboration on strengthening capacity to work with chemicals and hazardous waste under the Minamata Convention on Mercury.

h) Updating of the Regional Evaluation of Municipal Solid Waste Management Services in Latin America and the Caribbean 2016.

i) Collaboration on preparations for a PAHO/WHO symposium at the Inter-American Congress of AIDIS to be held in Guayaquil, Ecuador, and the AIDIS inter-American thematic congresses.

March of Dimes

11. The March of Dimes is a not-for-profit organization that works to improve the health outcomes of mothers and babies. March of Dimes works with partners globally. Its mission is to prevent birth defects, premature birth, and infant mortality by helping to improve the health of mothers and babies through research and medical support as well as community services, education, and advocacy.

12. The following activities were carried out over the last three years under the March of Dimes/PAHO collaborative work plan:

a) Newborn screening (NBS) across the Latin American Region. A survey was completed and two papers related to the status of newborn screening and the need to improve NBS were co-written by the March of Dimes and PAHO, which are currently under review and expected to be published in 2017.

b) Increased awareness of the toll, drivers, and economic costs of preterm birth. This project draws on initial country estimates of preterm birth rates and associated mortality in Latin America.

13. The following activities are proposed for the next three years under the March of Dimes/PAHO collaborative work plan:

a) Joint advancement of the birth defects and disability agenda in Latin America. The two organizations collaborated on participation in the 8th International
Conference on Birth Defects and Disabilities in the Developing World, to be held in Bogotá, Colombia, on 8-11 November 2017.

b) Advancement of preterm birth prevention in Latin America. A conference and workshop are being organized in Uruguay for 2017/2018 to further advance the scientific and policy discussions related to the prevention of preterm birth in Latin America as a follow-up to a conference convened by the International Federation of Gynecology and Obstetrics (FIGO) in Costa Rica in 2016.

c) Joint awareness-raising about birth defects/World Birth Defects Day (March 3). In collaboration with PAHO, activities are planned to raise awareness about birth defect risks, prevention, and care, mainly through social media and engagement of organizations worldwide.

United States Pharmacopeial Convention (USP)

14. The U.S. Pharmacopeial Convention (USP) is a scientific nonprofit organization that sets standards on the identity, strength, quality, and purity of medicines, food ingredients, and dietary supplements manufactured, distributed, and consumed worldwide. The USP standards for drugs are enforceable in the United States by the Food and Drug Administration, and the same or similar standards are used in more than 140 countries. Since its founding in 1820, the USP has worked to assure the quality of the drug supply in the United States. Building on that legacy, it now works with scientists, practitioners, and regulators from many nations to develop and revise standards that help protect public health worldwide.

15. The following activities were carried out over the last three years under the USP/PAHO collaborative work plan:

a) External Quality Control Program (EQCP). During the period under review, PAHO and the USP conducted two Steps (X and XI) in the performance evaluation phase of the External Quality Control Program (EQCP), a collaborative program initiated in 2001.

b) Pan American Network for Drug Regulatory Harmonization. In the context of the Pan American Network for Drug Regulatory Harmonization (PANDRH), USP staff participated in the VII and VIII Conferences of the Network (Ottawa, 5-7 September 2013, and Mexico City, 19-21 October 2016) and strongly supported activities and deliverables of the PANDRH Good Laboratory Practices Working Group (GLP-WG).

c) USP Spanish Translation Expert Panel. PAHO and the USP collaborated in offering technical assistance with pharmacopeial standards. Also, the translation of USP-NF standards into Spanish was monitored and guided by an panel of volunteer experts from several LAC countries, including a representative from PAHO.
d) Strengthening the capabilities of the Official Medicines Control Laboratory (OMCL). Within the framework of the Promoting the Quality of Medicines (PQM) program—a cooperative agreement between the United States Agency for International Development (USAID) and USP—a number of activities were coordinated with PAHO Headquarters and Country Offices during the period under review.

16. The following activities are proposed for the next three years under the USP/PAHO collaborative work plan:

a) Drug regulatory harmonization and convergence. As part of USP collaboration with the Pan American Network for Drug Regulatory Harmonization (PANDRH), the USP will continue to contribute its knowledge and experience on the quality and safety of medicines and other health technologies to advance relevant subject areas that have been identified as priority/strategic by the Network.

b) Technical assistance and cooperation in ensuring quality of medicines in LAC Countries. The USP will collaborate with PAHO in addressing regional needs in terms of quality of medicines and related technologies, as identified by PAHO.

World Association for Sexual Health (WAS) (formerly the World Association for Sexology)

17. Founded in 1978, the World Association for Sexual Health (WAS) promotes sexual health throughout the human life-span all over the world by developing, promoting, and supporting sexology and sexual rights for all. WAS accomplishes its objectives by advocating, networking, and facilitating the exchange of information, ideas, and experiences, while at the same time conducting scientifically based sexual research, sexual education, and clinical sexology using a trans-disciplinary approach.

18. The following activities were carried out over the last three years in accordance with the WAS/PAHO collaborative work plan:

a) Completion of the Spanish-language version of the World Professional Association on Trans Health (WPATH) Standards of Care of Trans Populations. The Spanish version was translated by WPATH and reviewed for technical content by WAS and PAHO.

b) Development of training-of-trainer educational materials. The handbook for training on transsexual health, Ampliándonos hacia lo diverso [opening ourselves up to diversity], was completed with technical input and revisions by PAHO.

c) Training in the care of key populations in Central America.

19. The following activities are proposed for the next three years in accordance with the WAS/PAHO collaborative work plan:
a) Strengthening sexual and reproductive health as part of reproductive health rights/development of an on-line Sexual Health Community of Practice Platform. In partnership with the PAHO/WHO Latin American Center for Perinatology, Women, and Reproductive Health (CLAP), WAS will develop the content and format for a Sexual Health Community of Practice platform in English and Spanish.

b) Development of a framework for strategic and comprehensive actions to accelerate progress towards the prevention and reduction of adolescent pregnancy in the Region. This framework, to be developed by PAHO, UNICEF, UNFPA, and WAS, is intended to help accelerate progress towards the prevention and reduction of adolescent pregnancy in the Region.

c) Collaboration on the development of a strategy for positive adolescent and youth development. Participation in the 2017 PAHO technical working group of experts and agencies working on positive adolescent and youth development.

d) HIV and STI prevention. Collaboration with PAHO on: i) a regional strategy on STI prevention and care for adolescents, including early diagnosis and treatment of adolescents in the Region; and ii) a review and update of the PAHO 2010 Blueprint for the Provision of Comprehensive Care to Gay Men and Other Men Who Have Sex with Men (MSM) in Latin America and the Caribbean.

e) Sexual health and aging. Participation in the Regional Consultation on Sexual Health of the Aging Population, with the objective of helping to produce a document on the outcomes and recommendations of this meeting.

20. PASB recommends deferral of a decision on the following non-State actor:

Latin American Federation of the Pharmaceutical Industry (FIFARMA)

21. The Latin American Federation of the Pharmaceutical Industry (FIFARMA) represents 12 pharmaceutical research and development companies and nine local associations of the pharmaceutical industry concerned with pharmaceutical research and development in Latin America. Its mission is to promote public policies that foster innovation and access to high-tech and high-quality medicines that prolong, preserve and improve the lives of patients in Latin America. It is guided by strict ethical principles focused on patient safety.

22. Given the importance of collaboration on regulatory system strengthening, PASB proposes that more time should be granted to allow exploration of the development of a more comprehensive plan of collaboration between the parties that best suits the work of PAHO.
23. PASB recommends that official relations be discontinued with the following non-State actor:

*International Diabetes Federation (IDF)*

24. The International Diabetes Federation (IDF) is an umbrella organization of over 230 national diabetes associations in 170 countries and territories. The Federation has been active on the global diabetes community since 1950.

25. No activities were carried out with the IDF during the last three years under the IDF/PAHO collaborative work plan and no activities with the International Diabetes Federation are planned for the next three years.
Annex B

PROGRESS REPORT ON THE STATUS OF ONGOING RELATIONS BETWEEN PAHO AND NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

American College of Healthcare Executives (ACHE)

1. In collaboration with PAHO, the ACHE held meetings on February, March, and September 2016 on subjects related to the Competencies Directory for Healthcare Executives. The following topics were discussed at the meetings: a) development of the global competency self-assessment; b) updates; c) role of academia; and d) promotion of the Competency Directory through participation in upcoming events and presentations. A follow-up meeting is scheduled for February 2017 at PAHO Headquarters.

2. ACHE also organized several presentations with PAHO participation, including a webinar titled “Advancing Healthcare Leadership Competencies,” held on 14 April 2016, and a presentation of the paper “Leadership Competencies for Health Care Service Managers” as part of the Catholic Health Association (CHA) Global Summit, held in Washington, D.C., on 21 September 2016.

American Speech-Language Hearing Association (ASHA)

3. In January 2013, ASHA and PAHO started a joint project focusing on three countries: El Salvador, Guyana, and Honduras. Two ad hoc committees, one in El Salvador and the other in Honduras, achieved their goals and disbanded in December 2015. In January 2016, three countries, Cuba, Ecuador, and Paraguay, were selected for ASHA/PAHO collaboration. Multiple joint publications were produced in 2016, including ASHA/PAHO collaboration, on the document “Road Toward Sustainability”; a paper presented at the Annual ASHA Convention titled “A Model of International Cooperation: The ASHA/PAHO partnership in Central and South America”; and the document “Speech-Language-Hearing Association ASHA/PAHO Collaboration: Building Capacity in Three Countries.”

4. In Guyana, ASHA collaborates with PAHO in providing technical support for the Ministry of Health (MOH) to strengthen the national strategic plan for early detection and intervention in communication sciences and disorders. Currently, members of the ASHA ad hoc committee are providing technical assistance for the Guyana MOH and the University of Guyana (UG). ASHA updated the medical rehabilitation assistant curriculum and also developed a speech-language therapy/audiology curriculum, and it assisted with volunteer faculty recruitment and procedures to evaluate clinical practice students. In Paraguay, ASHA/PAHO collaboration centers are providing technical support for the MOH and the National Secretariat of Human Rights for Persons with Disabilities (SENADIS) to educate professionals and parents of individuals with
communication disorders. A mission to assess needs in Paraguay took place in May 2016, and a workshop on evaluation methods was conducted 22-26 October 2016 in Asunción. Thirty-four professionals participated in this three-day workshop and a group of parents participated on the fourth day.

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

5. During the period 31 December 2015 through 31 December 2016, no joint CI-ROLAC/PAHO activities were undertaken.

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

6. Over the past year, the EMBARQ Ross Center for Sustainable Cities, through its Health and Road Safety Program, worked in Brazil, Colombia, and Mexico to reduce traffic fatalities and injuries. Their focus has been on improving road safety through sustainable transport and urban design, better data and analysis, and capacity-building efforts in local agencies. Between January and 15 December 2016, EMBARQ trained over 2,000 people globally, offering capacity-building workshops on such topics as road safety auditing, safer access to transit, safe systems, and safer mobility. A significant number of the participants were trained in the Institute’s Latin American countries of focus.

7. In addition, EMBARQ carried out multiple road safety audits and inspections and several of its recommendations are being implemented at the national level. In 2016, EMBARQ and the city of Bogotá, Colombia, drafted its first comprehensive road safety action plan. The city has also implemented safety improvements at several intersections. The Brazilian cities of Fortaleza and São Paulo have designated new safe speed zones with lower driving speed limits and implemented safer crossings for pedestrians.

**Healthy Caribbean Coalition (HCC)**

8. In 2016, the HCC continued its work in alignment with the objectives of PAHO including:

a) Salt consumption social marketing campaigns were developed and implemented by the Caribbean Salt Smart Coalition in Saint Vincent and the Grenadines and in Antigua and Barbuda.

b) Support for the Caribbean Civil Society Cervical Cancer Prevention Initiative (C4PI) (Belize, Guyana, Haiti, and Jamaica) was provided through grassroots projects, including civil society-led screening of vulnerable women (100 health care workers were trained and about 3,000 economically disadvantaged women were educated and screened for cervical cancer).
c) In Belize the HCC continued to work closely with the government to support expanded training, education, and screening, and the development of a national HPV vaccination programme.

9. The HCC is currently in the process of developing a childhood obesity action plan building on the recommendations of the WHO Commission on Ending Childhood Obesity (ECHO), the PAHO Regional Childhood Obesity Plan, and the Caribbean Public Health Agency (CARPHA) Regional Childhood Obesity Plan. On 18 November 2016, the HCC organized the First Annual Caribbean Alcohol Reduction Day. Misuse of alcohol is a significant problem. In partnership with PAHO and the Commonwealth Secretariat, the Implementation Framework for National NCD Commissions was completed in late 2016. The HCC also produced a number of related publications. In addition, it developed a draft Strategic Plan for 2017-2021 in consultation with its membership.

*Framework Convention Alliance on Tobacco Control (FCA)*

10. Collaboration between FCA and PAHO was fruitful in 2016. Some important areas of joint work included:

a) Support for the WHO Framework Convention on Tobacco Control (FCTC) – Conference of the Parties (COP). Its activities included a series of conference calls and meetings in preparation for the seventh session of the FCTC COP in Delhi, India, one of which was the Pre-COP7 Regional Meeting for the Americas in Panama.

b) Strengthening of regional capacity to support FCTC ratification/implementation. The FCH coordinated with PAHO on tobacco taxation issues and creation of a Regional Network on the Tobacco Economy and preparations for the 2017 Regional Tobacco or Health Conference, to be held in Uruguay in April 2017.

c) Support for tobacco control initiatives within the noncommunicable disease (NCD) platform. Activities included collaboration and presentations on NCDs during the World Cardiology Congress in Mexico and also the International Congress on Tobacco and NCDs in Panama.

d) Support for the Integration of tobacco control and FCTC within the Susttainable Development Goals Agenda (SDGs).

*Inter American College of Radiology (ICR)*

**Inter-American Society of Cardiology (SIAC)**

12. Joint SIAC/PAHO work continued to be strengthened. It is routine practice to share important spaces in regional and global congresses, such as the South American Cardiology Congress, held in Colombia in March 2016; Mexico’s World Cardiology and Cardiovascular Health Congress, held in June 2016; and the Congress of the Latin American Society of Hypertension, held in Guatemala October 2016. Participation in these events helped to promote the two organizations’ shared priorities. Activities are in alignment with global and regional plans for the prevention and control of noncommunicable diseases and they have continued to emphasize smoking cessation, control of hypertension, and secondary prevention.

13. PAHO and SIAC continue to promote the virtual course “Management of Hypertension for Primary Health Care Teams,” hosted by the PAHO/WHO Virtual Campus for Public Health. The course has reached 28,000 students. Work has also been undertaken on the development of a new virtual course focusing on secondary prevention of cardiovascular disease, to be officially launched in early 2017.

**Latin-American Association of Pharmaceutical Industries (ALIFAR)**

14. In 2016, ALIFAR collaborated with PAHO on a series of activities, including the following:

a) ALIFAR participated actively in the 158th Session of the Executive Committee and the 55th Directing Council of PAHO, where the document *Access and Rational Use of Strategic and High-Cost Medicines and Other Health Technologies* (Document CE158/15) was discussed and approved.

b) On the occasion of an informal WHO consultation regarding a guide for the evaluation of biosimilars of monoclonal antibodies, ALIFAR gave written comments and sent an expert to the meeting on this subject in Xiamen, China, in 2016.

15. ALIFAR also participated in virtual meetings of the Steering Committee of the Pan American Network for Drug Regulatory Harmonization (PANDRH), held in 2016. Laboratories affiliated to ALIFAR were encouraged to participate in the tender processes of the two PAHO Revolving Funds and the Caribbean Regulatory System (CRS). The Association also monitored health and intellectual property regulations issued by authorities in the Latin American countries associated with ALIFAR, with particular attention to registration and authorization rules for the marketing of biological medicines.

**Latin American Confederation of Clinical Biochemistry (COLABIOCLI)**

16. In 2016, COLABIOCLI partnered with PAHO in delivering an on-line course on quality management in clinical analysis laboratories to 78 participants. COLABIOCLI also formed a scientific committee with participants from the 12 countries (Argentina,
Bolivia, Brazil, Chile, Colombia, Cuba, Dominican Republic, Mexico, Paraguay, Spain, Uruguay, and Venezuela) for the submission of proposals.

17. Among other activities and participation in regional meetings, COLABIOCLI was represented at the Caribbean and Central America Meeting on Neonatal Research Programs, held in Panama in October 2016. During the 55th Directing Council of PAHO, COLABIOCLI presented a proposal to the Member States for neonatal research on congenital hypothyroidism and phenylketonuria, which is still under consideration. In 2016, it launched a new website (www.colabiocli.com), which will allow the delivery of on-line courses without extra cost for members of the Confederation.

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

18. Following the election of new leadership in late 2016, FLH and PAHO will discuss renewed forms of collaboration. Prior to that date, no joint collaboration activities were undertaken between 31 December 2015 and 31 December 2016.

**Latin American Society of Nephrology and Hypertension (SLANH)**

19. The joint work SLANH and PAHO has continued to consolidate. The role of SLANH has been important in mainstreaming issues, through all its regional forums, on the chronic kidney disease epidemic that affects the agricultural communities of Central America. SLANH also participated in the definition of case for the surveillance of this epidemic, reports on which were published at the end of 2016 in the *Pan American Journal of Public Health*.

20. SLANH is to be commended for its work on strengthening the technical capacity of national dialysis and transplantation registries. This activity ties in directly with one of the strategic objectives of PAHO—namely, increased access to therapies to support renal function replacement. In 2016, SLANH worked with the Latin American Dialysis and Transplantation Registry to offer a workshop and field visits to 13 countries in the Region. Also in 2016, SLANH and PAHO collaborated on the technical production and promotion of a virtual course on the prevention and management of chronic kidney disease for primary health care teams. To date, the course has trained 4,000 students.

**Mundo Sano**

21. In November 2016 in Cartago, Costa Rica, Mundo Sano participated as a guest in the XVI Intergovernmental Meeting of the Initiative of Central America and Mexico for Control of Vector-Borne and Transfusional Transmission and Medical Care for Chagas Disease (IPCAM, Spanish acronym). Mundo Sano continues to be a strong partner in efforts to understand and control Chagas and other diseases in the Region.
National Alliance for Hispanic Health (NAHH)

22. The NAHH has continued to work closely on several collaborative efforts with PAHO technical focal points from Department of Communicable Diseases and Health Analysis (CHA). For the current reporting period, the Alliance continued to support efforts to engage community leadership and civil society throughout the Americas in the prevention and control of noncommunicable diseases. To maintain the momentum from the Buena Salud Américas joint leadership meetings focusing on community initiatives held in partnership with the Ministry of Health of Colombia in 2013 and the Ministry of Health of Mexico in 2015, during 2016 the Alliance collaborated with PAHO, USF Health Panama, a program of the University of South Florida, and the University of Southern California (USC) in organizing the third joint leadership meeting to address cervical cancer and human papilloma virus (HPV).

23. The 2016 Buena Salud Américas leadership meeting took place in Panama City, Panama. The focus of the meeting was to establish a joint action plan and help build the capacity of community-based organizations and civil society groups in the Americas to address cancer and HPV. The two and a half-day meeting featured presentations on the current state of cervical cancer and HPV vaccination rates in the Region, as well as the impact of policy and multisector collaboration to address the prevention and control of cancer and HPV-related diseases in the Americas. Participants included governments, academic leaders, NGOs and PAHO representatives.

Panamerican Federation of Associations of Medical Schools (FEPAFEM)

24. PAHO participated jointly with FEPAFEM at the XX Pan American Conference on Medical Education, the Fifth International Congress on Medical Education of the World Federation for Medical Education (WFME), and the IV International Congress on Simulation in Medical Education (March 2016, Cancún, Mexico). The central theme of these events was the evaluation of medical schools for international accreditation. One of the topics discussed was the establishment of new requirements by the United States, to be implemented through the Educational Commission for Foreign Medical Graduates (ECFMG) starting in 2023. Under these new parameters, foreign physicians will only be accepted for medical specialty residencies if they graduate from medical schools accredited by agencies registered with WFME and FEPAFEM. WFME and FEPAFEM will introduce indicators on social responsibility and the contribution of medical schools to changes and the transformation towards universal health.

Pan American Federation of Nursing Professionals (FEPPEN)

25. FEPPEN and PAHO worked together to analyze and address the child mortality situation in Latin America and global efforts in the area of nursing in coordination with the 18 FEPPEN member countries. Examples of these efforts include:
a) In Brazil, a protocol of nursing actions was developed to respond to the Zika epidemic.

b) In Cuba, the National Nursing Associations have been monitoring infant mortality and levels of political support for maternal and child health programs. During 2016, FEPPEN worked in coordination with PAHO, the National Nursing Associations, and the Ministries of Health to develop their strategic plans of work. FEPPEN considers that primary health care is the key to success. In addition, FEPPEN has collaborated with PAHO on the development and dissemination of a series of webinars on the contribution of nursing in the Region of the Americas towards the strengthening of universal access to health and universal health care.

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

26. This NGO continues to be very active in all activities related to the prevention and control of noncommunicable diseases. Its work is well aligned with the priorities of the regional noncommunicable disease plan and strategy. Special mention should be made of its active role in coordination of the Healthy Latin American Coalition (CLAS), a forum from which all relevant causes have been supported, especially tobacco control, healthy diet, physical activity, and obesity prevention in children and adolescents.

27. IAHF has also played a prominent role in cardiovascular disease prevention through the reduction of salt/sodium intake and continues to participate in all relevant regional forums on cardiovascular prevention, including the Latin American and World Congresses of Cardiology and Cardiovascular Health, held in Mexico (June 2016), at which the 20th anniversary of the Foundation was celebrated in a joint plenary with the participation of PAHO and other relevant partners. The IAHF also participated in the joint PAHO/Inter-American Society of Cardiology meeting on the prevention and control of hypertension, held in Chile in late December 2015, and prepared the final report of this event. The IAHF actively and regularly participates in meetings convened by the PAHO Governing Bodies.

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

28. The RSMLAC redesigned its website in 2016 with improvements in its links to social networks. It gave wide dissemination to PAHO information on health and gender equity, including a video on gender inequalities in health in the Americas, tweets on the occasion of International Women’s Day, and collaboration with the Lila Downs campaign to reduce maternal deaths. Working with PAHO and other partners, the Network co-facilitated a panel on the social protection of health as a side event during the XIII Regional Conference on Women in Latin America and the Caribbean. This event was attended by the Deputy Minister of Health of Uruguay, who was one of the presenters. Nearly 100 people participated and a significant social media impact was achieved on Facebook and Twitter. The Network supports PAHO in mainstreaming the issue of universal access and universal health coverage to civil society. PAHO supported
the Network’s participation at the XIII Regional Conference on Women, convened by ECLAC and held in Uruguay.

**Sabin Vaccine Institute (Sabin)**

29. Sabin continues to support the development of a Sabin/PAHO work plan focused on training and advocacy initiatives related to immunization and the introduction of new vaccines in the Region of the Americas. Its Advocacy and Education Program frequently partners with PAHO on various symposia, training courses, and other gatherings. In addition, Sabin and PAHO are currently working on a number of research studies across a variety of diseases.

30. Current Sabin projects include, among many others:

a) Collaboration with PAHO and the U.S. Centers for Disease Control and Prevention (CDC) to expand the use of economic tools developed by PAHO through the ProVac Initiative to support national teams in low- and middle-income countries to build the economic, financial, and budgetary evidence to support sustainable financing, planning, and decision-making for their national immunization programs.

b) Sabin and PAHO partnered to update the definition of vaccination strategies against dengue in Latin America and the Caribbean.

c) It engaged in a joint work Sabin/PAHO initiative to strengthen pertussis surveillance in Latin America.

d) With PAHO support, Sabin continues to host the annual Ciro de Quadros Vaccinology Course in Latin America.
Annex C

SCHEDULE OF SPBA REVIEWS OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO
(as of 1 January 2017)

<table>
<thead>
<tr>
<th>Name</th>
<th>Date Admitted</th>
<th>Last Reviewed</th>
<th>Scheduled to be Reviewed</th>
</tr>
</thead>
<tbody>
<tr>
<td>American College of Healthcare Executives (ACHE)/[Colegio Estadounidense de Ejecutivos de Atención de Salud]</td>
<td>2014</td>
<td>–</td>
<td>2018</td>
</tr>
<tr>
<td>American Public Health Association (APHA)/ [Asociación Estadounidense de Salud Pública]</td>
<td>2013</td>
<td>–</td>
<td>2017</td>
</tr>
<tr>
<td>American Speech-Language-Hearing Association (ASHA)/ Asociación Americana del Habla-Lenguaje y Audición</td>
<td>2014</td>
<td>–</td>
<td>2018</td>
</tr>
<tr>
<td>American Society for Microbiology (ASM)/[Sociedad Estadounidense de Microbiología]</td>
<td>2001</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>Consumers International, Regional Office for Latin America and the Caribbean (CI-ROLAC)/Consumers International, Oficina Regional para América Latina y el Caribe</td>
<td>2014</td>
<td>–</td>
<td>2018</td>
</tr>
<tr>
<td>EMBARQ - World Resources Institute Center for Sustainable Transport/EMBARQ - Centro del Instituto de Recursos Mundiales para el Transporte Sustentable</td>
<td>2010</td>
<td>2014</td>
<td>2018</td>
</tr>
<tr>
<td>Framework Convention Alliance on Tobacco Control (FCA)/[Alianza para el Convenio Marco]</td>
<td>2015</td>
<td>–</td>
<td>2018</td>
</tr>
<tr>
<td>Healthy Caribbean Coalition (HCC)/[Coalición Caribe Saludable]</td>
<td>2012</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Inter-American Association of Sanitary and Environmental Engineering/Asociación Interamericana de Ingeniería Sanitaria y Ambiental (AIDIS)</td>
<td>1995</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>Name</td>
<td>Date Admitted</td>
<td>Last Reviewed</td>
<td>Scheduled to be Reviewed</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>---------------</td>
<td>---------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>Inter-American College of Radiology/Colegio Interamericano de Radiología (ICR)</td>
<td>1988</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>InterAmerican Heart Foundation (IAHF)/Fundación InterAmericana del Corazón (FIC)</td>
<td>2002</td>
<td>2015</td>
<td>2018</td>
</tr>
<tr>
<td>Interamerican Society of Cardiology/Sociedad Interamericana de Cardiología (SIAC)</td>
<td>2012</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>International Diabetes Federation (IDF) / Federación Internacional de la Diabetes (FID)</td>
<td>1996</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>Latin American and Caribbean Women’s Health Network (LACWHN)/Red de Salud de las Mujeres Latinoamericanas y del Caribe (RSMLAC)</td>
<td>2004</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Latin American Association of Pharmaceutical Industries/Asociación Latinoamericana de Industrias Farmacéuticas (ALIFAR)</td>
<td>2000</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Latin American Confederation of Clinical Biochemistry/Confederación Latinoamericana de Bioquímica Clínica (COLABIOCLI)</td>
<td>1988</td>
<td>2014</td>
<td>2018</td>
</tr>
<tr>
<td>Latin American Federation of Hospitals/Federación Latinoamericana de Hospitales (FLH)</td>
<td>1979</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Latin American Federation of the Pharmaceutical Industry/Federación Latinoamericana de la Industria Farmacéutica (FIFARMA)</td>
<td>1979</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>Latin American Society for Nephrology and Hypertension/Sociedad Latinoamericana de Nefrología e Hipertensión (SLANH)</td>
<td>2015</td>
<td>–</td>
<td>2018</td>
</tr>
<tr>
<td>March of Dimes</td>
<td>2001</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>Mundo Sano</td>
<td>2016</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>National Alliance for Hispanic Health (NAHH)/Alianza Nacional para la Salud de los Hispánicos</td>
<td>1996</td>
<td>2014</td>
<td>2018</td>
</tr>
<tr>
<td>Name</td>
<td>Date Admitted</td>
<td>Last Reviewed</td>
<td>Scheduled to be Reviewed</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>---------------</td>
<td>---------------</td>
<td>-------------------------</td>
</tr>
<tr>
<td>Panamerican Federation of Associations of Medical Schools (PAFAMS)/Federación Panamericana de Asociaciones de Facultades y Escuelas de Medicina (FEPAFEM)</td>
<td>1965</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Pan American Federation of Nursing Professionals/ Federación Panamericana de Profesionales de Enfermería (FEPPEN)</td>
<td>1988</td>
<td>2016</td>
<td>2019</td>
</tr>
<tr>
<td>Sabin Vaccine Institute (Sabin)/ Instituto de Vacunas Sabin (Instituto Sabin)</td>
<td>2011</td>
<td>2015</td>
<td>2018</td>
</tr>
<tr>
<td>United States Pharmacopeial Convention (USP)/ Convención de la Farmacopea de Estados Unidos</td>
<td>1997</td>
<td>2013</td>
<td>2017</td>
</tr>
<tr>
<td>World Association for Sexual Health (WAS) (formerly the World Association for Sexology)/ Asociación Mundial de Salud Sexual (antes llamada “Asociación Mundial de Sexología”)</td>
<td>2001</td>
<td>2013</td>
<td>2017</td>
</tr>
</tbody>
</table>