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XXXVIII MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH

WASHINGTON, D.C., 3–5 NOVEMBER 2003 – PAHO HEADQUARTERS - ROOM B

REPORT TO THE DIRECTOR

**ACHR Secretariat
Research Promotion and Development Unit
Information and Knowledge Management Area
DD/IKM/RC
Washington, D.C.**

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**REPORT OF THE XXXVIII MEETING PAHO ADVISORY COMMITTEE ON HEALTH RESEARCH
WASHINGTON DC, 3-5 NOVEMBER 2003**

I- Foreword

1- Opening Session

1.1- Address by Dr. Jorge Allende, Chairman of the ACHR

Dr. Allende began by highlighting the special character of the current meeting, it being the first under the new PAHO administration. He announced his retirement as chairman of the Committee stating his satisfaction for having been part of the ACHR these last five years and for the achievements in this period. Among the achievements, he mentioned establishing closer ties with the CONICYTs since the meeting of 1998 in Caracas, which culminated with the establishment of the SCienTI network that allows the exchange of information of high importance for the definition of S&T policies in the countries of the Region. He also praised the work of the Grants Program, particularly the multicenter projects that permit the countries of the Region to complement and coordinate efforts around important public health projects. He also drew attention to the agreements with expert institutions such as the Harvard University, the NIH, and the Instituto de Salud Carlos III, and RELAB, with whom several joint calls for proposals have been made in support of projects in the area of environment and infectious diseases, including the recent agreement PAHO/RELAB/ICGEB in support of molecular virology projects. All these activities reflect a political decision to work with governments, institutions, and researchers for the improvement of health.

Progress in biomedicine, such as the one facilitated by the human genome project, defines a change of paradigm in research that recognizes the complexity of the relationship between living things and the environment, permitting new ways for understanding and fighting disease. In addition to the genome, there have been other progresses made, such as stem cell research and discovery of the RNA of interference that permits silencing specific genes, etc. He also made reference to threats such as bioterrorism, and emerging diseases like SARS that signal the need to strengthening surveillance systems and epidemiological monitoring.

In closing, he stressed that many are the work opportunities for PAHO to promote research for health improvement. Among these, the most important is reducing the gap between the countries that generate knowledge and those that are kept away from its benefits.

1.2- Address by Dr. Mirta Roses, PAHO Director

Initially, Dr. Roses made reference to the changes in the Organization structure and to the basic documents that should orient the new administration such as the 2003-2007 Strategic Plan, Health in the Americas, and Public Health in the Americas, all of them approved by the PAHO Steering Committee in its meeting in 2002 when the new Director was elected.

Dr. Roses pointed out three aspects that should focus the Committee's attention:

The first one refers to the work of the new technical area called Information and Knowledge Management (IKM), which includes units of direct interest to the ACHR, such as, Research, BIREME and Bioethics. She asked the Committee for work orienting recommendations for this new technical area, including guidance on how to articulate its different Units.

The second aspect refers to inequities. Despite the efforts steered by the principle of health for all originated in the meeting of Alma-Ata 25 years ago, inequities persist. Knowledge contribution to fight them should be the central axis of the Committee's concern.

The third aspect refers to the new challenges to cooperation. How to adopt and implement the concept of collaborating networks to include the various actors involved in the social production of health. New instruments like the VHL and the Virtual Campus provide major spaces to strengthen the networks, including implementing networks of networks to take better advantage of the potential offered by the CONICYT networks, the Collaborating Centers, the Academies networks, and others. The experience with RELAB is very positive and it should be expanded with other networks in the field of social and political sciences, like FLACSO, facilitating a more balanced approach between what is biological and social.

In response to an question about PAHO's priorities, she mentioned that their definition should take into account three types of references: the inconclusive agenda, with a strong ethical dimension because although knowledge, technologies and resources are available, countries and population groups still undergo health problems that should have been overcome long ago. The second category is protection of the feats achieved. The idea that progress in improvement and development of health conditions is inexorable has been refuted by facts that demonstrate that it is actually possible to revert in accomplished life expectancy, nutrition and others. The third category deals with the new challenges in a globalized world that transnationalizes such risks as diet related, sedentary lifestyles, addictions, violent acts, emerging diseases, etc. Every country faces these challenges, but in an unequal world, the greatest burden falls to developing countries and the most vulnerable groups. To deal with these, an integration of strategies like PHC, health promotion, social inclusion and protection, and human rights should be sought, and it competes to the ACHR to define the role that information and knowledge must play in their support.

1.3- Presentation of the Agenda

Dr. Alberto Pellegrini, Secretary of the ACHR, presented the agenda, mentioning that because this is the first meeting of the ACHR under the new PAHO administration, most of its items referred to the technical cooperation perspective regarding research within the scope of the new administration led by Dr. Mirta Roses. All the activities on the first day of the ACHR meeting would be dedicated to discussing strategies and lines of work of the new technical area known as Information and Knowledge Management (IKM), under which are the Unit of Research Promotion and Development (IKM/CR) and BIREME, who would be presenting their main cooperation activities at present and in the future.

The second day of the meeting would be dedicated to ACHR members visiting the new technical areas, created in the process of restructuring PAHO. They would visit the five technical areas and discuss with the corresponding staff members the technical cooperation in research component that they intend to develop. On the third day of the meeting they would submit their report about these visits with their observations and suggestions to the plenary of the Committee. Also to be presented on the third day were the annual report on the Research Grants Program and the results of one multicenter projects it supported, "Health, Welfare, and Aging (SABE)." On the third day, as well, there would be a presentation about the Institute of Medicine of the US National Academies activities, particularly those of international projection, exploring possible collaboration opportunities with PAHO. Finally, the ACHR presidency would be transferred to Dr. Victor Penchaszadeh, who would share his thoughts about future activities of the Committee.

2- PAHO technical cooperation on Information and Knowledge Management

Dr. Richard Van West-Charles, Area Manager of PAHO Information and Knowledge Management (IKM) began his presentation by stating that many of the 20th century accomplishments are the result of access to knowledge, which increasingly is confirmed as a critical resource for development. Research contributes to production of knowledge however the ordinary citizen, the governments and institutions still do not identify research as a vital component of development, but instead as a luxury. For that reason many professionals ignore or do not possess knowledge and research capabilities.

The ACHR consistently has stated that research is an essential function in health development, which implies that it should be accessible to all levels of society. Research and knowledge should be regarded as public goods. What can be done to have research generated knowledge be understood by society?

A fundamental PAHO/WHO mission is the promotion of Health in the Americas based on the principle of sharing knowledge. This is what it has been doing in its 100 years of existence although not necessarily systematically. The current PAHO Director established a new technical area in the Organization called Information and Knowledge Management (IKM) in recognition of the importance of research in the production of knowledge geared to development.

Sometimes there is some confusion between information, knowledge, and knowledge management. According to Wiig, information describes circumstances, situations, and problems, while knowledge allows people to handle problems and solve them. Knowledge management refers to a set of principles, processes, organizational structure, and technological applications for reaching the organizational objectives. It shows a cultural change for sharing and learning. Since research is a knowledge generating activity, a critical aspect of the investigator's work is to be concerned about the application of knowledge for the solution of health problems that hinder the development process.

Researchers are frequently concerned with being published in a prestigious journal, but if being involved in research is not merely an academic objective, then their principal concern should be how to turn generated knowledge into action. Furthermore, evaluation is an important

research component, and the impact of research supported with PAHO resources should be evaluated, for example, policies that are defined based on its findings. A recent work of the Organization regarding the essential public health purpose highlighted the unsatisfactory performance of health systems in research. The sectoral reform processes did not institutionalize research to improve efficiency of the health systems. It is fundamental to evaluate the research proposals in regard to ethical principles and human rights.

The countries of the Americas face emerging issues at the start of the 21st century such as climate changes, transgenic food, and genomic research. These are issues of growing importance and necessary to guarantee that research provides the necessary evidence to orient the decision-making process of policies related to these issues.

In closing, Dr. Van West-Charles presented the new strategies and lines of action that should orient work of the new IKM area. Their axis would be the promotion of a culture of information and knowledge exchange both within the Organization and in its relation with Member Countries. The creation of an Organization based on knowledge poses a great challenge that should be dealt with the adequate use of new technologies and by strengthening the collaborating network at several levels.

3- Progress in the Implementation of the Virtual Health Library and the SCienTI Network

Drs. Abel Packer, Director of BIREME, and Roberto Pacheco, Director, Group Stela, UFSC, Brazil, presented this subject. Dr. Packer began by presenting the background documentation and the development of the VHL, characterizing its current stage of implementation in 7 dimensions:

- In regard to VHL as a network of information sources, he highlighted the progress in the consolidation of LILACS, with 657 journals titles from 17 countries, and of SCIELO which today counts with 179 titles of scientific journals in the Region. The VHL as a whole has more than 100,000 full texts and the recent inclusion of the Cochrane Library already has more than 12,000 registered users.
- With regard to the VHL as a convergence space for managers, producers, intermediaries, and users of the information, he pointed out the constitution of networks like SCienTI, SHARED, and SCIELO. The VHL already has 7 national portals and 5 being developed, in addition to 4 thematic portals with 5 more in development. He also mentioned various events produced by the VHL, highlighting the CRICS where, increasingly, various types of health and information sciences professionals participate, as well as researchers, decision makers, and other interested parties from the Region and abroad.
- With regard to the VHL as a platform for the definition of national and institutional policies, he pointed out the various mechanisms developed by the VHL to promote equitable access and informative inclusion.

- In regard to the VHL as a media-goal to increase visibility, quality, and impact of information produced in the Region, he mentioned that the journals included in SCielo significantly increased its impact on the ISI. Web services are facilitating access to various VHL information sources from different portals and access routes;
- As management knowledge based entity, the VHL contributes to making that any local action may have a potentially global projection, thus facilitating a cultural change in the sense of transparency and information exchange.
- The VHL as the development motor of local capability to handle methodologies and technologies has permitted the consolidation of developers' networks responsible for adapting, introducing, adopting, and developing new technological tools.

Finally, as for future challenges, the VHL should continue to be consolidated at country levels, should promote development of human resources at different types and levels, should promote the definition of national and institutional information policies, should promote greater citizen participation, and finally should be consolidated as the standard platform for PAHO technical cooperation with regard to health sciences information.

Next Dr. Pacheco presented the SCienTI Network (International Network of Information and Knowledge Sources for the Management of Science, Technology and Innovation), starting with a brief history of its origin three years ago, highlighting the launching meeting in Florianopolis, Brazil, in 2002, and the first meeting of the Inter-institutional Committee in Puebla, Mexico, in 2003. The objectives of SCienTI are:

- To promote international standardization and availability of C&T&I data, including, curricula, institutions, research groups, projects, scientific and technological output;
- To promote activities in collaborative networking looking for the exchange of contents, methodologies and C&T&I tools, maintaining the sovereignty, policies and national interests of participating countries;
- To make viable the 'nationalization' of tools developed and available in the network, permitting, for example, utilization of specific nomenclature per participating country;
- To facilitate and strengthen exchange of information and knowledge for C&T&I management.

The network is made up of national S&T organizations, international organizations, development groups in S&T information sciences, and promotional institutions that contribute all types of resources to the Network. SCienTI also allows for construction of indicators, demographic analysis of researchers, monitoring graduates, scientific and technological output evaluation, and other important S&T management elements. Brazil already has 300,000 curricula and 15,158 research groups in 200 institutions on its platform, while Colombia, in a few months, already has registered 13,500 curricula and 1500 groups. In closing, Dr. Pacheco made reference to the challenges in consolidating the Network, and the work of support technical groups that are making recommendations about indicators and reference standards, criteria for public dissemination of available information, and Network financial sustainability mechanisms.

4- The Virtual Library in Science and Health and Management of Scientific Activity

Dr. Alberto Pellegrini, chief of PAHO Research Promotion and Development Unit (IKM/RC), made this presentation. He began by making reference to the models and concepts that have oriented the formulation of S&T policies in health in Latin America and the Caribbean since the second half of the 20th Century, pointing out that certain characteristics of those models, such as the “offer” approach, the distinction between basic and applied research, the centralized and not very participatory planning are responsible for a chronic weak link between the scientific communities and other social sectors, have resulted, in the final analysis, in weakness of the ties between science and society.

In recent decades, more intensely since the 1990s, the knowledge production mode has gone through significant transformations that redefine how research agendas, institutional arrangements where research activities are carried out, validation criteria, as well as transfer dissemination, and utilization of knowledge modes are established. Those changes form a new mode of knowledge production and the corresponding S&T management cannot be based on decisions made exclusively at the central S&T agencies to which very few have access. The decisions on policies, priorities, and other management aspects of the scientific and technological activity within this new mode require the creation and multiplication of application contexts, that is, of spaces and opportunities for interaction among the various actors to analyze and identify problems, exchange knowledge, and to establish consensus on the paths to be followed.

Taking into account that this new mode of knowledge production allows to better take advantage of the Science potential to promote common well-being, and that some trends are already being observed in regard to its implementation in the Region, the Pan American Health Organization (PAHO) has been developing a series of initiatives to strengthen these trends. These initiatives articulate themselves in a cooperation strategy known as DECIDES, an acronym for “Democratizing Knowledge and Information for the Right to Health.” Among these initiatives are the coordination and financial support of multicenter research projects and the creation of the Virtual Health Library (VHL) (www.bireme.br).

At the same time in that it is an organized collection of information sources, in digital format, with infinite storage capacity that facilitate universal access in real time, the VHL is also a virtual platform that allows interactions among knowledge producers, intermediaries, and users, having become effectively an application context for analysis and identification of problems, knowledge exchange and collective decision-making.

Dr. Pellegrini then presented the Virtual Health Library for Science and Health, BVS/CyS (<http://cys.bvsalud.org>), which objective is to promote and support in the Region the management of scientific activity in health, based on data and evidence and in the participation of the various social actors to strengthen it, and to reinforce its relationship with the various sectors of society. He presented the contents of this BVS/CyS, in regard to information sources, and spaces of interaction, the latter exploring the BVS potential to promote the exchange between knowledge producers, intermediaries, and users.

With regard to the construction process of the VHL/Science and Health, Dr. Pellegrini said that it is done in a decentralized way, through networks of S&T institutions in the Region. The most important of these networks is the SCienTI Network, integrated by national and international agencies of science and technology and by research development groups. Governance of the BVS/CyS is guaranteed by a Regional Advisory Committee (CCR) in which participate representatives of institutions related to health research management. The CCR technical/executive secretariat is undertaken by PAHO Research Unit supported by BIREME.

Finally, Dr. Pellegrini presented the BVS/CyS current status, launched in May 2003, during the CRICS VI, held in Puebla, Mexico, and now accessible at this web address <http://cys.bvsalud.org>. He also presented the Work Plan for development of this VHL in 2003-2004, as well as the principal activities carried out in 2003 within this plan, highlighting the first Conference of Citizen Consensus held in Chile, progress made in collecting documents and Web sites classified in BVS/CyS, and consolidation of the SCienTI network. The second meeting is scheduled in December 2003.

5- Visits to PAHO Technical Areas

ACHR Members visited five technical areas of PAHO in the second day of the meeting to discuss with the respective staff members:

- the research/knowledge needs in the area;
- the objectives, strategies, priorities, and expected results of research related cooperation activities planned for the next biennium;
- the examples of research supported by the technical area the findings of which were effectively utilized in technical cooperation and in the countries;

On the third day of the meeting the ACHR members presented to the Committee plenary their observations and recommendations in regard to these visits. The reports of the visits are attached to this Final Report of the ACHR meeting.

6- Presentation of the Institute of Medicine (IOM) and the InterAcademies Medical Panel (IAMP) activities

Dr. David Challoner, Foreign Secretary of the Institute of Medicine (IOM) made a presentation on the activities of the IOM and the InterAcademy Medical Panel (IAMP). The IOM is member of the National Academies of the United States. Its mission is to advise the nation in the improvement of health, trying to provide recommendations based on evidence. Of the IOM members 75% (1078) belong to the health and medicine field and the remaining 25% to other fields such as natural, social and behavioral sciences, engineering, etc. The members of the Institute are outstanding professionals with interests, skills, and abilities that contribute to the

Institute activities related to the assessment of existing knowledge, development, re-studies, and review of policy issues. Of its 1507 members 71 are foreign associates.

The principal items of the Institute agenda are: food safety and appropriate nutrition, global health and infectious diseases, health care systems, military personnel, and veterans, public health, research on health sciences and human safety, and bioterrorism. The IOM carries out various activities in regard to these subjects, such as studies of consensus, meetings of experts, workshops and round tables. On average, at a given point in time there are 70 studies in process and nearly 24 annual workshops and meetings of experts. The budget of the Institute in 2002 was close to 30 million dollars, 77% from federal resources (of these 50% of DHHS), 19% from private resources, and others.

Dr. Challoner also presented the InterAcademy Medical Panel (IAMP) created in 2001, with the purpose of functioning as a way of promoting the participation of the Academies of Medicine, and of the medicine sections of the Academies of Sciences, in the promotion of global health particularly in the developing countries. The IAMP has a total of 43 member academies, six of them in Latin America. Among IAMP principal activities, he mentioned the Conference held in Paris, in March 2002, “Facing Infections, Antibiotic Resistance, and Bioterrorism in the World”, and its participation in the project “Disease Control Priority (DCPP).”

The DCPP is a joint project of the International Fogarty Center of the National Institutes of Health of United States, WHO, and the World Bank, financed through a grant of 3.5 million from the Gates Foundation and foreseen to end in 2005. Its objective is to produce analysis and materials to base policy decisions and priorities in developing countries. The role of the IAMP in the DCCP is to form an international advisory committee to review materials produced by the project, evaluate the findings, and advise on their dissemination and utilization in the decision-making on policies in developing countries.

7- Presentation of the results of the Multicenter Project, “Health, Welfare, and Aging” (SABE)

Dr. Martha Pelaez presented the principal findings of the PAHO Grants Program financed Multicenter Project “Health, Welfare, and Aging” (SABE). The project dealt with a survey of a random sample of older adults living in the following urban areas: Buenos Aires, Argentina; Bridgetown, Barbados; Havana, Cuba; Mexico City, Mexico; Montevideo, Uruguay; Santiago, Chile, and Sao Paulo, Brazil. The survey was designed mainly to answer the following questions: What is the present health situation of the elderly and which are the factors that affect this condition? What are the social protection schemes for this population? What are the cultural and family values related with care of the elderly? How do decision makers respond to the health and well-being of the elderly?

The data collection began in October 1999 and, after the cleaning process initiated in August 2000, a database in electronic format has been created, it is available by request, in CD-ROM, for students, investigators and decision makers. SABE has been used in the preparation of policy documents throughout the Region and it has been the principal data source for preparing

the ministerial meeting to be held in Chile in 2003 to implement the International Action Plan on Aging. Currently, six of the seven countries have their report being printed or under editorial review and they will be available by the end of this year. Three regional publications are being prepared: a special issue of the Pan American Journal of Public Health, a special issue of the Journal of Aging and Health, and a book on Health and Welfare of the Elderly in Latin America and the Caribbean.

Afterwards, after discussing some methodological aspects, Dr. Pelaez presented the principal findings. In regard to the health situation evaluated through self-perception, a strong correlation with objective health indicators was observed; she pointed out that this was a good synthesis indicator of health status. The relationship between health situation measured in this way and the socioeconomic level (SES) is positive in developed countries. In the case of SABC a model of regression was established utilizing the self-perceived good health as a dependent variable with age, sex, marital status, education, SES and living conditions as principal co-variants.

The association between education and health is positive in general and particularly significant for the population with higher education (7 or more years). Having a higher education is related to more probabilities of describing good health in four of the cities (Buenos Aires, Mexico, Santiago and Sao Paulo), varying from 0.13 in Mexico to 0.26 in Buenos Aires. With respect to the relationship between SES and health, in all seven cities a high level of SES is associated with high probability of reporting good health. Controlling by age, sex, marital status, education, and housing, SES association with health is positive in all the cities but with extreme dispersion, which can indicate comparatively the magnitude of the inequities among the cities. For example the probability of reporting good health associated with high SES varies from 0.09 in Havana to 0.21 in Sao Paulo, indicating that in the latter having a high SES means better health in a greater extent than in Havana. A woman aged 65-74, with a low level of education, low SES, and bad living conditions has a probability of reporting good health that varies from 0.20 for Mexico to 0.48 for Montevideo, indicating inequities among the cities in health protection for low SES population.

The prevalence of disability is related to age, SES, diseases, and access to health systems. The association between disability and older age is positive in all the cities. To be 75 years old or older is associated with an increased probability of reporting disability that varies from 0.11 in Montevideo to 0.20 in Buenos Aires, Mexico and Santiago. Controlling other variables, women have greater probability of reporting disability in comparison with men, except in Mexico. SES is not associated with disability, except in Bridgetown and Montevideo, where having 7 or more years of education is associated with a lesser probability of disability by nearly 0.08. Living in an extended home is related positively to disability in three cities only: Mexico, Montevideo, and Sao Paulo. For a woman with the aforementioned characteristics the probability of having some disability varies from 0.16 in Havana, 0.22 in Montevideo, to nearly 0.26-0.29 for other cities, indicating that lower education and low SES is less associated with disability in Havana than in other cities. The probability for this same woman to receive daily assistance for disability varies from 0.41 for Mexico to 0.82 in Sao Paulo. The low values found for Mexico, Bridgetown, and Montevideo may indicate a weak protection system to those suffering from disabilities.

Near 80% of the interviewees in SABE have at least one chronic condition and 50% at least two. Santiago, Havana, and Montevideo have the highest proportion of elderly living in life threatening conditions. In Barbados and Cuba, education is not a significant variable to predict the probability of having one of these conditions, but it is significant in other countries. This may reflect greater access to services and greater awareness of health problems among the elderly in Cuba and Barbados. The fact that SES does not have a significant association in any city goes against expectations and indicates a need for future analyses.

Likewise in other regions of the world, Latin America is experiencing a change in nutrition and exercise patterns, which results in high obesity levels, diabetes, and other diseases. Although there were a large number of studies conducted in children and young adults on this issue, the same thing did not occur with the elderly. SABE changed this situation and today there are available databases for 6 capital cities on self-reported diabetes, its treatment, and complications. Already it has been demonstrated that self-reported diabetes is reliable and that occasional errors are in the underestimation of its prevalence.

Obesity prevalence levels exceed 15% in all cases, except in Cuba and can reach 32% as in Uruguay. The minimum levels of diabetes are 13% and can reach 22% as in Mexico and Barbados. These obesity and diabetes prevalence levels are higher than in the United States and show a great heterogeneity among countries, which can be related to the different stages of nutritional transition. Women present 15% to 20% higher obesity prevalence than men in all the countries. It was observed that the probability of reporting diabetes was strongly influenced by obesity and by measures that reflect exposure to poor nutrition during infancy like height of the knee. The social class differentials are important for obesity, but not for diabetes. Those two findings deserve future research and would not be possible without SABE.

In conclusion, Dr. Pelaez listed the works in progress by the network of investigators that participate in SABE, the assessment of the direct and indirect costs of diabetes and obesity in the elderly; the effects of childhood conditions on the probability of acquiring diabetes and obesity; the relationship between socioeconomic variables, diabetes, and obesity; the determinants of appropriate treatment and the cost of not observing the same; and finally, the effects the presence of diabetes in the elderly have on the members of the household, living arrangements, and transference.

8- Report of the Grants Program

Dr. Rebecca de los Rios, of the PAHO Unit of Research Promotion and Development, submitted the Research Grants Program (RGP) report stating that on this occasion, in addition to describing the number of approved projects in its various modalities, the report would concentrate on the RGP contribution to the management of knowledge, and more specifically to the contribution of the projects financed between 1996 and 2003 in orienting action in the priority areas of public health.

The RGP is envisioned as a promotional tool for research and for articulation of the initiatives developed by the Technical Units and Pan American Centers in the generation,

dissemination and utilization of knowledge for improving living and health conditions of the continent populations.

In 1996, the ACHR in its XXXI Meeting reviewed the RGP performance and recommended the Director to reorient its research promotional and support strategies. These had as their main purpose to promote collaboration mechanisms among countries, to strengthen their research capacity, reinforce the link between the RGP and other PAHO units, as well as with other national and international agencies, and to facilitate the dissemination and utilization processes of generated knowledge. Priority research areas and four support modalities were defined, namely, multicenter projects, research competitions, support for master and doctorate theses, and fellowships/grants for advanced training in public health research. In order to increase visibility of scientific output supported by the RGP the Research Information System (RIS) was created. It may be accessed through the BVS/CyS.

The period 1996-2003 was very intense in supporting multicenter projects and research competitions. These projects have been effective instruments in forming and operating collaboration networks like those established on violence and accidents, aging and health, inequities and health, and health and economic growth. The multicenter projects in particular have played an important role in strengthening the national research capabilities in countries with lower relative development and under North-South and South-South collaboration patterns.

A fact worth mentioning with regard to exchange and collaboration between countries is the model promoted by the PAHO-RELAB initiatives for financing joint projects between two or more laboratories of Latin America and the Caribbean, and more recently, the Research on Molecular Virology initiative supported by PAHO/RELAB and the ICGEB.

With respect to publication and dissemination of findings of the completed studies, most of the researchers published in national and international journals and participated in forums and local debates on the subject. Special Issues of the Pan American Journal of Public Health on the subject of Violence and Inequities in Health have been published based on studies about these subjects financed by the RGP. However, it is necessary to admit that the efforts for publication, dissemination, and utilization of the findings have not been on a par with the expectations. On the other hand, both PAHO Research Unit and the Technical Units involved in the multicenter projects and/or regional competitions have incorporated the findings in policy papers presented to Governing Bodies, in health education and communication materials, in organizations of scientific dissemination and in Thematic Virtual Health Libraries.

The RGP strategies implemented since 1996 have been able to mobilize resources from PAHO Technical Units and Pan American Centers, as well as from the PAHO/WHO Collaborating Centers. Regarding the modalities oriented to the researchers education and training, the mobilization of technical and financial resources from different institutions has been significant, among them, national science and technology organizations, the National Institutes of Health of the United States through the John E. Fogarty International Center for Advanced Studies in Health Sciences, the IDRC of Canada, regional scientific networks such as RELAB, Instituto de Salud Carlos III of Spain, and the ICGEB and others.

In conclusion, Dr. De los Rios mentioned that, in general, the RGP initiatives revealed very satisfactory results in the construction of research networks and the development of collaborative projects to promote exchange between countries. Furthermore, the modalities dedicated to researchers education and exchange yielded very good results and in 2004-2005 it is expected to increase the number of collaborating institutions for advanced training of researchers and development of collaborative projects. However, the publication of findings (in-progress and final) and their timely dissemination should be improved, particularly in the competition and multicenter modalities. Finally, Dr. De los Rios pointed out that this report refers only to the RGP and does not account for all the research promotional and support efforts PAHO conducts.

9- Reflections of the new Chairman of the ACHR on the activities of the Committee

Dr. Victor Penchaszadeh, new ACHR Chairman, assumed his new functions thanking Dr. Mirta Roses for his appointment and the honor it means to be the Committee Chairman. His reflections concentrated on four aspects: the role of research, PAHO's role in research, the role of the Research Unit, and finally the role of the ACHR.

Regarding the role of research, in addition to being in agreement with everything that had been said about its importance in this and other sessions of the ACHR, he emphasized the need for strengthening the mechanisms for the application and utilization of knowledge, in order for research to effectively develop its potential for improving health and wellbeing. He stressed the importance of a multidisciplinary approach to the complex problems of public health, giving as an example the Human Genome project that would not have the impact it has if the economic, legal, social, and ethical aspects had not been taken into account from its beginning.

With respect to PAHO's role, although the Organization does not perform research, it should be concerned both with the promotion and generation of knowledge and its utilization. PAHO is one of the most suitable Agencies for defining a priority agenda to serve as guidance to the countries and to the national and international research promotion agencies. PAHO should also take advantage of its legitimacy before the governments to advocate for greater support to research from their part. The democratization of knowledge, including participation of the communities in defining priorities is also an important role that PAHO can play. Its role in disseminating the findings and promoting their utilization by the decision makers is also one of the most important roles it can fulfill.

Concerning the Research Unit role, it is essential to strengthen it with adequate resources and institutional visibility so that it can fulfill its role of resource mobilization from other technical areas of PAHO, and from national and international agencies, academies, human resources training institutions, and other institutional actors important for research. The Grants Program as an important induction and technical cooperation tool should be preserved and expanded.

Finally, with regard to the ACHR, its existence should extend beyond the meeting and it should have a greater presence in PAHO life, collaborating with the Research Unit in its relations within and outside the Organization. He recognized the expertise wealth of the ACHR due to the

excellence of its membership and the diversity of disciplines they represent, committing to reinforce the communication mechanisms among members and to promote collaboration links among them for discussing new ideas and participating in new initiatives. He considers that the Committee can play an important articulating role with the regional and international scientific community and concluded by declaring his enthusiasm to facing the challenge that the presidency of a body as the ACHR represents.

10- Closing of the meeting

Closing the meeting, Dr. Joxel García, PAHO Deputy Director, thanked the ACHR members for their collaboration with the Organization and their valuable recommendations. In the name of the PAHO Administration, he made the commitment to put out all efforts to implement them taking into account the current juncture limitations. He closed the meeting stating that the ACHR provides the scientific leadership the Organization needs to fulfill its advocacy role on the importance of research for improving health of the peoples of the Region.

II- Discussions and Recommendations

1- PAHO technical cooperation in Information and Knowledge Management

In regard to this item the ACHR made the following observations and recommendations:

- The concept of knowledge as a public good has serious ethical implications, having to discriminate, based on ethical principles, what type of information should or should not be placed in the public domain. These principles can ultimately be in contradiction with intellectual rights regulations, thus making it necessary to establish standards to counteract this contradiction.
- It is important to establish an adequate balance between IKM “internal” and “external” activities, so that the dynamic between the two would be of mutual reinforcement, thus increasing the porosity between the Organization and the countries. The “external” work of IKM implies mastering abilities and capabilities to act in different environments, with different cultures and levels of development. It also implies recognizing that knowledge is not the exclusive domain of experts and that it should be mobilized through collaborative strategies between different actors organized in networks with intensive use of new technologies.
- Excess of knowledge rather than leading into action may lead to a real paralysis. An important IKM strategy is to organize knowledge in such a way that the deluge of information and knowledge may be translated to human scale and effectively orient actions.
- The establishment of a share-and-exchange culture within the Organization does not depend only on information and knowledge. Change in behavior and attitude in this regard also depends on the establishment of adequate incentives.
- The broad and equitable access to information is fundamental for the “empowerment” of citizens and to promote social participation in the decision-making processes. The use of new information and communication technologies is very important to prevent the expansion of already existing gaps in the access to information and knowledge among countries and groups. Creative solutions should be adopted like the better utilization of points of public access.

2- Progress in implementation of the Virtual Health Library and the SCienTI Network

In regard to this item, the Committee made the following observations:

- The CONICYT's requirement to use one unique electronic curriculum format could potentially expand inequities in the access to resources among the research groups. However, the way implementation of the CvLAC is being done in countries of the

Region allows expanding the number of research groups that participate in the calls for proposals promoted by these agencies.

- So that the scientific and technical information may become an important variable in the process of policy definition, the decision-makers should have access to the pertinent information duly organized and in an adequate format.
- The quality of the information included in the curricula is a recurrent concern and the best guarantee is the transparency the Internet provides. Recovery of the curricula through filters makes it possible to differentiate the various skill levels among the researchers; to identify experts for peer-review; and to support the work of university accreditation commissions.
- The information generated by the VHL and the SCienTI Network should allow the construction of indicators of input, product, and impact of the scientific output in order to support the managerial processes of the scientific activity.

3- The Virtual Library in Science and Health and the Management of Scientific Activity

With reference to this item, the Committee made the following observations:

- Organizations like PAHO should promote the production mode of socially distributed knowledge to reinforce science contribution to the solution of health problems. Nevertheless, a national policy of scientific development should also include research generated on the basis of the researcher's curiosity. An adequate coexistence of both ways of knowledge production promotes mutual reinforcement.
- Sábato's known triangle, State, University, and Enterprise, could not be consolidated in the Region by the organic articulation of its three elements, particularly because of the companies' resistance to participate. This continues to be a challenge for the complete success of the new interaction spaces, such as those facilitated by the VHL.
- Utilization of the BVS/CyS as an integral part of the managerial processes of scientific activity should systematically be evaluated both through the quantitative indicators of use/number of visits (hits) and of liaisons (links), as well as through qualitative indicators such as origin of the users and degree of satisfaction.

4- Visits to PAHO Technical Areas

Further to the specific observations and recommendations mentioned in the reports of each visit, the ACHR made the following general comment:

- Although the different technical areas may need to increase their available resources to promote research, this should not be done at the expense of resources allocated to the Grants Program. Fragmentation of these resources would diminish the capacity of the

Program to induce research in priority areas, and could compromise consistency of the quality criteria.

- Periodically PAHO should promote seminars or in-house workshops on research to discuss the progress in research cooperation of each technical area. The IACR would be a suitable forum to promote these seminars preferably during the biannual cooperation evaluation period.
- The findings of the visits made during this meeting should not end with the report prepared by the ACHR Members. Mechanisms to monitor them should be sought by means of two-way interaction between the ACHR members and the staff of the different technical areas.

5- Presentation of the Institute of Medicine (IOM) and the InterAcademies Medical Panel (IAMP) activities

- The IAMP should include regional chapters, since ultimately the studies and projects that it promotes or carries out may not necessarily be of similar interest and priority in all the regions of the world.
- This first contact with the IOM and the IAMP should be monitored in order to explore future relations and concrete proposals for joint activities with the ACHR and PAHO given the coincidence of their objectives. The ACHR aims to bring PAHO closer together with the regional and international scientific community and the IOM/ IAMP could play an important role as a bridge with that community.

6- Presentation of Findings of the Project: “Health, Welfare, and Aging”(SABE)

Principal observations and recommendations related to this subject were as follows:

- The project SABE is an example of what PAHO can and should do with regard to research promotion and development with relatively limited resources. The project facilitated horizontal cooperation through the formation of a network of institutions and researchers, some without experience in the subject that became interested in it. SABE did not end with a final report on each country as it tends to happen with this type of projects, instead, it is promoting a series of performance monitoring activities and making the data available to the scientific community for future studies. SABE has helped enhance studies on the elderly, becoming a platform for other studies like the longitudinal ones that are being developed in Mexico, Puerto Rico, and Costa Rica.
- SABE has initiated an important validation effort for several tools that should be continued taking into account the Region cultural diversity. The great differences observed in the perception of health status among the cities could be dependant on the juncture when the survey was made—an important fact in a region subject to economic crises. It may depend also on the prevalence of depression, a strong association was observed between a high prevalence of depression and a negative health status perception. The relationship between SES and hypertension is well known and it is

related to the characteristics of the productive basis of societies, as well as to the transition moments they go through.

- In future studies derived from SABE, the economic aspects of health and well-being of that population should be underlined, taking into account their importance as a part of society's human capital.

7- Report on the Research Grants Program (RGP)

In regard to this report, the ACHR made the following remarks and recommendations:

- The RGP should continue to be consolidated as an integrated program, both from the standpoint of integration production/dissemination/utilization, as from the standpoint of integration among the different technical areas of the Organization, respecting their vocation and function.
- The RGP should redefine its priorities periodically in accordance with the health needs, as expressed in "Health in the Americas." These priorities should serve as guidelines for the use of the Program resources and for mobilization of resources from other sources.
- The aspects of publication, evaluation, and utilization of findings should be present throughout the research process. An adequate balance should be sought both between the need to disseminate the findings as fast as possible, including the preliminary results, for their prompt utilization, and the academic legitimacy of the scientific publication that, among other criteria, should include that of originality. Eventually, a conflict can be observed between the two aspects, being that predominance of one of them usually comes at the expense of the other. This applies also to the Pan American Journal of Public Health, which should have a policy that considered both aspects.
- The ACHR ratifies its previous recommendations with regard to the RGP in the sense of preserving the fund and utilizing it to multiply the impact of its limited resources. That implies maintaining and, if possible, expanding the funds allocated to the Program to consolidate its different modalities and preserve consistency of its scientific criteria. The Program has achieved significant impact in terms of production of original knowledge and researchers training and it is very important that its achievements rather than lost be expanded.

8- The Jacques Parisot Foundation Award

The Jacques Parisot Foundation Award is granted every year by the World Health Organization (WHO). Every year, investigators of a given Region compete for this award. In 2003 the beneficiaries are researchers of the Region of the Americas. The award consists of a grant of US\$ 5,000 to finance a research proposal. The principal researcher receives the award during the World Health Assembly held in May every year. The competition theme is selected by the corresponding Regional Director, and Dr. Roses selected the theme "Healthy Environments for the Children" that coincides with the theme of World Health Day 2003.

In accordance with competition regulations, the Regional ACHR must review the proposals and make its recommendations to a Selection Panel in WHO, which in turn makes recommendations for the final decision to the Executive Board. PAHO's Research Promotion and Development Unit sent letters announcing the competition to all the Ministries of Health, all of PAHO Representatives in the countries, and in addition placed the announcement in the Internet. Seven proposals were received. Four of them met the requirements and were submitted for the review of the ACHR. Drs. Luis Rosero Bixby and Terrence Forrester constituted a sub-committee in charge of the review of the proposals and selected two. Their first recommendation went to the project "*The emerging impact of the HIV/AIDS on children and AIDS orphanhood in Barbados*" presented by Dr. Alok Kumar of the Queen Elizabeth Hospital of Barbados. As alternate they selected the project "*Impact of intestinal parasitic infections on children's health*" by Dr. Ana Maria Acuña Zúñiga of the Medical School of the University of the Republic of Uruguay. The ACHR endorsed these recommendations.

ANNEXES



Pan American Health Organization

*Regional Office of the
World Health Organization*

Celebrating 100 years of Health

ACHR 38/2003.1
Original: English/Spanish

XXXVIII MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH

Agenda

**PAHO Headquarters - Room B
Washington, D.C.
3-5 November 2003**

**XXXVIII Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington DC**

AGENDA

MONDAY, 3 November 2003

- | | |
|-------------------------|--|
| 09:00 a.m. – 10:15 a.m. | Opening session
Address by Dr. Jorge Allende, Chairman of the ACHR
Address by Dr. Mirta Roses, Director of PAHO |
| 10:15 a.m. – 10:30 a.m. | Presentation of the Agenda
Dr. Alberto Pellegrini, Secretary of the ACHR |
| 10:30 a.m.–11:00 a.m. | Coffee break |
| 11:00 a.m. - 12:30 p.m. | PAHO's technical cooperation in Information and
Knowledge Management
Dr. Richard Van West-Charles, Area Manager, IKM |
| | Lunch break |
| 02:00 p.m. - 03:30 p.m. | Progress in the implementation of the Virtual Health
Library (VHL) and SCienTI Network
Mr. Abel Packer, Director, BIREME
Mr. Roberto Pacheco, Director, Group Stela |
| 03:30 p.m. – 04:00 p.m. | Coffee break |
| 04:00 p.m. - 05:00 p.m. | The Virtual Library in Science and Health and management
of the scientific activity
Dr. Alberto Pellegrini, Chief, IKM/RC |
| 05:00 p.m. – 05:30 p.m. | General orientation prior to visits to
PAHO Technical Areas |

**XXXVIII Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington DC**

TUESDAY, 4 November 2003

09:30 a.m. - 05:30 p.m.

Visits to selected Technical Areas of PAHO as follows:

- ❖ Disease Prevention and Control (AD/DPC-CD/R).
Responsible Officer: Dr. Stephen Corber.
ACHR Visitors: doctors Jorge Gavilondo, Jorge Allende

- ❖ Sustainable Development and Environmental Health (AD/SDE).
Responsible Officer: Dr. Luiz Augusto Galvão.
ACHR Visitors: Dr. Miguel Laufer.

- ❖ Family and Community Health (AD/FCH).
Responsible Officer: Dr. Gina Tambini.
ACHR Visitors: doctors, Ligia de Salazar, Luis Rosero Bixby

- ❖ Technology and Health Services Delivery (AD/HRT).
Responsible Officer: Dr. José Luis Di Fabio.
ACHR Visitors: Dr. Terrence Forrester

- ❖ Strategic Development of Health (DPM/SHD).
Responsible Officer: Dr. Pedro Brito.
ACHR Visitors: doctors: Victor Penchaszadeh and André Contandriopoulos

**XXXVIII Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington DC**

WEDNESDAY, 5 November 2003

09:00 a.m. - 10:30 a.m.	Reports of the visits Members of the ACHR
10:30 a.m. - 11:00 a.m.	Coffee break
11:00 a.m. - 11:15 a.m.	Presentation on the activities of the Institute of Medicine Dr. David Challoner Foreign Secretary, US Institute of Medicine, (IOM)
11:15 a.m. - 12:30 p.m.	Presentation of results of the Multicenter Project “Health, Welfare and Aging in Latin America and the Caribbean” Dr. Martha Pelaez Lunch break
02:00 p.m. - 03:00 p.m.	Report of the Research Grants Program Dr. Rebecca de los Rios
03:00 p.m. - 03:30 p.m.	Coffee break
03:30 p.m. - 05:30 p.m.	Review of the meeting Report to the Director Reflections of the new ACHR Chairman on the Committee activities Dr. Victor Penchaszadeh Closing Session Dr. Joxel Garcia, PAHO Deputy Director



XXXVIII MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH

List of participants

**PAHO Headquarters - Room B
Washington, D.C.
3-5 November 2003**

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List of Documents / Lista de Documentos

No. ACHR/CAIS	Title - Título	Available/Disponible	
		English	Español
38/2003.1	Agenda Programa	√	√
38/2003.2	List of Participants Lista de Participantes	√	√
38/2003.3	List of Documents Lista de Documentos	√	√
38/2003.4	The Management of Scientific Activity and the Virtual Health Library/Science and Health (BVS/CyS) La Gestión de la Actividad Científica y la BVS/Ciencia y Salud	√	√
38/2003.5	The Research Grants Program Contribution to Knowledge Management Contribución del Programa de Subvenciones para la Investigación a la Administración del Conocimiento.	√	√
38/2003.6 and 6.a	Institute of Medicine (IOM) Inter-Academy Medical Panel (IAMP)	√	
38/2003.7	Health of Older Persons – Some findings from the PAHO Multicenter Survey (SABE)	√	
38/2003.8	Research and Knowledge	√	
38/2003.9	Progress in the Implementation of the Virtual Health Library (VHL) and the SCienTI Network http://www.paho.org/English/hdp/hdr/result.htm?cat=cais&year=2003 http://www.paho.org/Spanish/hdp/hdr/result.htm?cat=cais&year=2003	Available only in: Disponible solo en: CD-ROM or at Meeting website	
38/2003.10	Final Report Informe Final	√	√
38/2003.11	Technical reports for Visits to PAHO Units Informes Técnicos para visitas a las Unidades de la OPS	√	√