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REPORT OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH

1. The 38th Meeting of the Advisory Committee on Health Research (ACHR) was held at PAHO Headquarters in Washington, D.C. from 3 to 5 November 2003.
2. The session was chaired by Dr. Jorge Allende of Chile, who noted the special nature of the meeting, since it was the first meeting of the Committee under the new PAHO administration. He announced his retirement as Chairman of the Committee, expressing his satisfaction at having participated in the ACHR for the past five years and at the successes achieved during the period. Dr. Mirta Roses took the floor, highlighting three areas in which the Committee should concentrate its efforts. The first was the work of the new technical area called Information and Knowledge Management (IKM), which includes units of direct interest to the ACHR, such as the Research Promotion and Development Unit (IKM/CR), BIREME, and Bioethics Unit. The second was inequities, which should be a key focus of Committee concerns in terms of the contribution of scientific advances and the existing knowledge to combat this problem. The third was the new challenges of cooperation—in particular, how to adopt the concept of networking and put it into practice to encourage collaboration among the various actors involved in health development.
3. As this was the ACHR's first meeting under the new PAHO administration, most of the issues discussed were related to the outlook for technical cooperation in research under Dr. Mirta Roses. The Committee report details the IKM's strategies and lines of work, highlighting activities supporting the management of scientific activity in health, using the tools and information sources of the Virtual Health Library (VHL) and the SCienTI Network. The report discusses the visits by the members of the ACHR to the new technical areas and units created with the restructuring of the PASB and notes their recommendations concerning the existing and proposed research agendas.

4. The main conclusions and recommendations of the ACHR emphasized in the report are those that mention knowledge in health as a public resource, noting the need to discriminate, based on ethical principles, about what type of information should or should not be placed in the public domain. These principles may ultimately conflict with the regulations governing intellectual property rights, making it necessary to put standards in place to deal with this problem.

5. The ACHR pointed out that an excess of knowledge, rather than leading to action, can lead to veritable paralysis and indicated that an important strategy for IKM would be to organize knowledge in a way that will ensure that the deluge of information and knowledge will be translated to a human scale and effectively guide actions. It reiterated that for scientific and technical information to become an important variable in policy-making, decisionmakers should have access to pertinent information duly organized in an adequate format.

6. The information generated by the VHL and the SCienTI Network should allow the construction of input, product, and impact indicators of scientific output in order to support the management of scientific activity. In this regard, the ACHR recommended advancing with the countries in the analysis of both scientific output in health and its relevance to the health priorities of the Region to determine which areas need to be stimulated and buttressed. However, the Committee underscored that a national scientific development policy should also include research generated by the scientific curiosity of researchers.

7. The Research Grants Program (RGP) should periodically redefine its priorities in accordance with health needs, as expressed in *Health in the Americas*. These priorities should serve as guidelines for the use of Program resources and the mobilization of resources from other sources.

8. The aspects of publication, evaluation, and utilization of findings should be present throughout the research process. There should be an adequate balance between the need to disseminate findings, including preliminary findings, as quickly as possible for their prompt utilization and the academic legitimacy of the scientific publication, whose criteria include originality. A conflict occasionally rises between the two, with one predominating over the other. This is true even for the *Pan American Journal of Public Health*, whose policies should take both aspects into consideration.

9. The ACHR reiterates its earlier recommendations with regard to the RGP—that is, to preserve the fund and use it to multiply the effects of its limited resources. This implies maintaining and, if possible, increasing the funds allocated to the Program to consolidate its different modalities and preserve the consistency of its scientific criteria. The Program has had a significant impact in terms of generating original knowledge and

training researchers, and it is very important that its achievements not be lost but expanded.

10. Finally, the report contains the statement of Dr. Víctor Penchaszadeh of Argentina, the new Chairman of the ACHR, who assumed his functions thanking Dr. Mirta Roses for his appointment and for the honor of being Committee Chairman. His remarks concentrated on four areas: the role of research, PAHO's role in research, the role of the IKM/CR Unit, and the role of the ACHR.

Annex



**Pan American
Health
Organization**

Regional Office of the
World Health Organization

Celebrating 100 years of Health

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Annex

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38th 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.

**REPORT OF THE 38th MEETING OF THE PAHO ADVISORY COMMITTEE ON HEALTH RESEARCH
WASHINGTON D.C., 3-5 NOVEMBER 2003**

I- Presentations

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, relating his satisfaction for having been part of the ACHR these last five years and for the achievements during this period. Among the achievements, he mentioned establishing closer ties with the National Science and Technology Board (ONCyTs) since the meeting of 1998 in Caracas, which culminated with the establishment of the International Network of Information and Knowledge Sources for the Management of Science, Technology, and Innovation (SCienTI). SCienTI allows the exchange of information of great importance for the definition of science and technology (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 drew attention to the agreements with expert institutions, such as Harvard University and the National Institutes of Health (NIH) in the United States, the *Instituto de Salud Carlos III in Spain*, and *Red Latinoamericana de Ciencias Biológicas (RELAB)*, with which several joint calls for proposals have been made in support of projects in the area of environment and infectious diseases, including the recent agreement of the PAHO/RELAB/International Center for Genetic Engineering and Biotechnology (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 of understanding and fighting disease. In addition to the genome, there has been other progress made, such as stem cell research and discovery of the RNA of interference that permits silencing specific genes. He also made reference to threats, such as bioterrorism and emerging diseases, such as SARS, that signal the need to strengthen surveillance systems and epidemiological monitoring.

In closing, he stressed that there are many 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 denied its benefits.

1.2- Address by Dr. Mirta Roses Periago, PAHO Director

Initially, Dr. Roses made reference to the changes in the Organization's structure and to the basic documents that should orient the new Administration, such as the Strategic Plan for the Pan American Sanitary Bureau for the Period 2003-2007, *Health in the Americas*, and *Public*

Health in the Americas, all of them approved by the PAHO Directing Council 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 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, the Latin American and Caribbean Center on Health Sciences Information (BIREME), and Bioethics. She asked the Committee for work-oriented recommendations for this new technical area, including guidance on how to articulate its different units.

The second aspect refers to inequities. Despite the efforts guided by the principles of Health for All, which originated at the meeting of Alma-Ata 25 years ago, inequities persist. The gathering and dissemination of knowledge to fight these inequities should be the central axis of the Committee's concern.

The third aspect refers to the new challenges to cooperation. How can the concept of collaborating networks to include the various actors involved in the social production of health be adopted and implemented? New instruments, such as the Virtual Health Library (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 ONCyTs networks, the Collaborating Centers, the Academies networks, and others. The experience with RELAB is very positive and should be expanded with other networks in the field of social and political sciences, for example, *Facultad Latinoamericana de Ciencias Sociales* (FLACSO), facilitating a more balanced approach between what is biological and social.

In response to a question about PAHO's priorities, the Director mentioned that their definition should take into account three types of references. The first is 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 areas such as accomplished life expectancy and nutrition. The third category deals with facing the new challenges in a world where risks related to diet, sedentary lifestyles, addictions, violent acts, emerging diseases, etc. are globalized. Every country faces these challenges, but in an unequal world, the greatest burden falls upon developing countries and the most vulnerable groups. To deal with these, an integration of strategies, such as primary health care, health promotion, social inclusion and protection, and human rights, should be sought; and this is a call for 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 were dedicated to discussing strategies and lines of work of the new technical area known as Information and Knowledge Management, under which are the Unit of Research Promotion and Development (IKM/CR) and BIREME, which would be presenting the main cooperation activities at present and in the future.

The second day of the meeting was dedicated to ACHR members visiting the new technical areas, which were created in the process of restructuring PAHO. They visited the five technical areas and discussed with the corresponding staff members the technical cooperation in the research component that they intended to develop. On the third day of the meeting, they submitted their report on these visits with observations and suggestions to the plenary of the Committee. Also presented on the third day were the annual report of the Research Grants Program and the results of one multicenter project it supported, "Health, Welfare, and Aging" (SABE). On the third day, as well, there was a presentation about the activities of the Institute of Medicine of the National Academies of the United States, 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, began his presentation by stating that many of the twentieth 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, 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 understood by society?

A fundamental PAHO mission is the promotion of health in the Americas based on the principle of sharing knowledge. This is what the Organization 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 in recognition of the importance of research in the production of knowledge geared to development.

Sometimes there is some confusion among 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

^{*} Wiig KM. Knowledge and Management Foundations: Thinking about Thinking. Knowledge and Management Institute Inc.; 1993.

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 effort of the Organization regarding the essential public health functions 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 research proposals in regard to ethical principles and human rights.

The countries of the Americas face emerging issues at the start of the twenty-first century, such as climate changes, transgenic food, and genomic research. These are issues of growing importance and are 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. The axis would be the promotion of a culture of information and knowledge exchange both within the Organization and with Member States. The creation of an Organization based on knowledge poses a great challenge that should be concerned with the adequate use of new technologies and strengthening the collaborating network at several levels.

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

Dr. Abel Packer, Director of BIREME, and Dr. Roberto Pacheco, Director of Group Stela *Universidade Federal de Santa Catarina (UFSC)*, Brazil, presented this subject. Dr. Packer began by presenting the background and development of the VHL, characterizing its current stage of implementation in seven dimensions:

- In regard to the VHL as a network of information sources, he highlighted the progress in the consolidation of *Índice de Literatura Latinoamericana en Ciencias de la Salud (LILACS)*, with 657 journal titles from 17 countries, and SCielo, which today has 179 titles of scientific journals from the Region. The VHL as a whole has more than 100,000 full texts and with 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 information, he pointed out the constitution of networks such as SCienTI, Scientists for Health Research and Development Network (SHARED), and SCielo. The VHL already has seven national portals with five being developed, in addition to four thematic portals with five more in development. He

also mentioned various events produced by the VHL, highlighting the *Congreso Regional de Información en Ciencias de la Salud (CRICS)* where, increasingly, various professionals from the health and information sciences participate, as well as researchers, decision-makers, and other interested parties from within and outside the Region.

- 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 Information Science Institute (ISI). Web services are facilitating access to various VHL information sources from different portals and access routes.
- As a management-of-knowledge-based entity, the VHL contributes to ensuring 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 of 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, starting with a brief history of its origin three years ago and highlighting the launching meeting in Florianopolis, Brazil, in 2002, and the first meeting of the Interinstitutional Committee in Puebla, Mexico, in 2003. The objectives of SCienTI are to:

- promote international standardization and availability of science and technology and innovation (S&T&I) data, including curricula, institutions, research groups, projects, and scientific and technological output.
- promote activities in collaborative networking geared to the exchange of contents, methodologies, and S&T&I tools, maintaining the sovereignty, policies, and national interests of participating countries.

- make viable the ‘nationalization’ of tools developed and available in the network, permitting, for example, utilization of specific nomenclature for each participating country.
- facilitate and strengthen the exchange of information and knowledge for S&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, has already registered 13,500 curricula and 1,500 research groups. In closing, Dr. Pacheco made reference to the challenges in consolidating the Network, and the work of technical support 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 the PAHO Research Promotion and Development Unit, began his presentation on this topic 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 twentieth century. He pointed out that certain characteristics of those models, such as the “offer” approach, the distinction between basic and applied research, and centralized planning with limited participation, are responsible for a chronic weak link between the scientific communities and other social sectors, and have resulted, in the final analysis, in weakness of the ties between science and society.

In recent decades, and 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 by 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 establish consensus on the paths to be followed.

Taking into account that this new mode of knowledge production allows taking better 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 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 (www.bireme.br).

The VHL is an organized collection of information sources in digital format with infinite storage capacity that facilitate universal access in real time and, at the same time, 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 was launched in May 2003, during the CRICS VI, held in Puebla, Mexico. This Library's objective is to promote and support the management of scientific activity in health in the Region, based on data and evidence with the participation of various social actors to strengthen, and 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 potential to promote the exchange among knowledge producers, intermediaries, and users.

With regard to the construction process of the VHL for Science and Health, Dr. Pellegrini said that it is carried out in a decentralized way, through networks of S&T institutions in the Region. The most important of these networks is the SCienTI, 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 in which representatives of institutions related to health research management participate. This committee's technical/executive secretariat is undertaken by the PAHO Research Unit supported by BIREME.

Finally, Dr. Pellegrini presented the BVS/CyS current status, the Work Plan for its development in 2003-2004, and 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 this VHL, and consolidation of the SCienTI. The second meeting regarding this Library is scheduled to take place in December 2003.

5- Visits to PAHO Technical Areas

The ACHR members visited with staff of five technical areas of PAHO on the second day of the meeting to discuss:

- research and knowledge needs in the area;
- objectives, strategies, priorities, and expected results of research-related cooperation activities planned for the next biennium;
- 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 Interacademy Medical Panel (IAMP) Activities

Dr. David Challoner, Foreign Secretary of the Institute of Medicine, made a presentation on the activities of the IOM and the Interacademy Medical Panel. The IOM is a component of the National Academies of the United States. Its mission is to advise the nation concerning the improvement of health, providing recommendations based on evidence. Of the IOM members, 75% (1,078) 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 1,507 members, 71 are foreign associates.

The principal items on 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, 77% from federal resources (of these 50% from the Department of Health and Human Service, 19% from private resources, and others.

Dr. Challoner then discussed the Interacademy Medical Panel, which was created in 2001, to encourage the participation of the Academies of Medicine and the medicine sections of the Academies of Sciences in the promotion of global health, particularly in 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 “Facing Infections, Antibiotic Resistance, and Bioterrorism in the World,” which was held in Paris, in March 2002, 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, the World Health Organization (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 analyses and materials on which to base policy decisions and priorities in developing countries. The role of the IAMP in the DCPP 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”

Dr. Martha Pelaez, Regional Advisor on Healthy Aging with the PAHO Technology and Health Services Delivery Unit, presented a report on the Multicenter Project “Health, Welfare, and Aging,” which was financed by the PAHO Grants Program. The project dealt with a survey of a random sample of older adults living in the following urban areas: Buenos Aires, Argentina; Bridgetown, Barbados; São Paulo, Brazil; Santiago, Chile; Havana, Cuba; Mexico City, Mexico; and Montevideo, Uruguay. 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 situation? What are the social protection schemes for this population? What are the cultural and family values related to 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 data cleaning process initiated in August 2000, a database in electronic format was 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 was 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 reports 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.

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 the health situation measured in this way and the socioeconomic level (SES) is positive in developed countries. In the case of SABE, a model of regression was established utilizing self-perceived good health as a dependent variable with age, sex, marital status, education, SES, and living conditions as principal covariants.

The association between education and health is positive in general and particularly significant for the population with higher education (seven years or more). Having a higher education is related to more probabilities of describing good health in four of the cities (Buenos Aires, Mexico City, Santiago, and São Paulo), varying from 0.13 in Mexico City 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 the variables of 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 São Paulo, indicating that in the latter having a high SES means better health to a greater extent than in Havana. A woman aged 65 to 74 years, 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 City 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 City, and Santiago. Controlling other variables, women have a greater probability of reporting disability in comparison to men, except in Mexico City. SES is not associated with disability, except in Bridgetown and Montevideo, where having seven 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 City, Montevideo, and São 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 City to 0.82 in São Paulo. The low values found for Mexico City, Bridgetown, and Montevideo may indicate a weak protection system for those suffering from disabilities.

Approximately 80% of the interviewees in SABE have at least one chronic condition and 50%, at least two. Havana, Montevideo, and Santiago 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 Barbados and Cuba. The fact that SES does not have a significant association in any city goes against expectations and indicates a need for future analyses.

As 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 results did not occur with the elderly. SABE changed this situation and today there are available databases for six 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 Barbados and Mexico City. 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, for example, knee height. 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, presented 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 articulation of 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 populations of this Hemisphere.

In 1996, the ACHR in its 31st Meeting reviewed the RGP performance and recommended that the Director of PAHO reorient research promotional and support strategies. These had as their main purpose to promote collaboration mechanisms among countries, strengthen their research capacity, reinforce the link between the RGP and other PAHO units as well as with other national and international agencies, and 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 the scientific output supported by the RGP, the Research Information System was created. It may be accessed through the BVS/CyS.

During the period 1996-2003, the RGP very actively supported the multicenter projects and research competitions. These projects have been effective instruments in forming and operating collaboration networks similar to 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 lesser relative development and with North-South and South-South collaboration.

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 ICGEB.

With respect to the 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. 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 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 expectations. On the other hand, both the PAHO Research Unit and the technical units involved in the multicenter projects and/or regional competitions have incorporated the findings in policy papers which were presented to the Governing Bodies, in health education and communication materials, in organizations which disseminate scientific information, 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 the PAHO/WHO Collaborating Centers. Regarding the modalities oriented to the education and training of researchers, the mobilization of technical and financial resources from different institutions has been significant. Among them are the 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 International Development Research Center (IDRC) of Canada, regional scientific networks, such as RELAB, *Instituto de Salud Carlos III* of Spain, 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 the education and exchange of researchers yielded very good results; and in 2004-2005, the number of collaborating institutions for advanced training of researchers and the development of collaborative projects is expected to increase. 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 promotion and support efforts carried out by PAHO.

9- Reflections of the New Chairman of the ACHR on the Activities of the Committee

Dr. Victor Penchaszadeh, the new ACHR Chairman, assumed his functions thanking Dr. Mirta Roses for his appointment and for 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 attain its potential for improving health and well-being. 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 had the impact it has had 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 with both 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 for research on their part. The democratization of knowledge, including the participation of communities in defining priorities is also an important role that PAHO can play. Its role in disseminating the findings and promoting their utilization by decision-makers is also one of the most important roles it can fulfill.

Concerning the role of the Research Unit, it is essential to strengthen it with adequate resources and institutional visibility so that it can fulfill its responsibility concerning 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 influence should extend beyond the meeting. 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 wealth of expertise 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 believes the Committee can play an important articulating role with the regional and international scientific community and concluded by declaring his enthusiasm to face the challenge that the presidency of a body such as the ACHR represents.

10- Closing of the Meeting

In 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 committed to making every effort to implement the recommendations taking into account the current limitations. He stated that the ACHR provides the scientific leadership the Organization needs to fulfill its advocacy role on the importance of research for improving the 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, due to having to discriminate, based on ethical principles, about 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 sharing 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 the intensive use of new technologies.
- An excess of knowledge rather than leading to 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. A 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 the promotion of 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, such as the better utilization of points of public access.

2- Progress in the Implementation of the Virtual Health Library and the SCienTI

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

- The ONCyTs requirement to use one unique electronic curriculum format could potentially expand inequities in the access to resources among research groups. However, the way *Curriculum Vitae Latinoamericano y del Caribe* (CvLAC) is being implemented in the 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 pertinent information duly organized and in an adequate format.
- The quality of 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, identify experts for peer review, and support the work of university accreditation commissions.
- The information generated by the VHL and the SCienTI 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.
- The SCienTI is a project of extraordinary importance for Latin America and the Caribbean, and every effort should be made to extend it to all the countries of the Region.

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, such as PAHO, should promote the production mode of socially distributed knowledge to reinforce the contribution of science 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 well-known triangle—the State, the university, and enterprise—could not be consolidated in the Region by the 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 comments:

- 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 effect 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 International Agency for Research on Cancer (IACR) would be a suitable forum to promote these seminars preferably during the biannual evaluation period of cooperation.
- The findings of the visits made during this meeting should not end with the report prepared by the ACHR members. Mechanisms to monitor the findings 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 and the Interacademy Medical Panel Activities

- The IAMP should consider having 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.
- The 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”

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 but who became interested in it. SABE did not end with a final report on each country as tends to happen with this type of project, 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, such as the longitudinal ones that are being developed in Mexico City, Puerto Rico, and Costa Rica.
- SABE has initiated an important validation effort for several tools that should be continued, taking into account the Region’s cultural diversity. The great differences observed in the perception of health status among the cities could be dependant on the situation when the survey was made—an important fact in a region subject to economic crises. It also depends 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 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 the health and well-being of the population should be underlined, taking into account their importance as a part of society’s human capital.

7- Report on the Research Grants Program

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 of production/dissemination/utilization, and 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 between, on the one hand, the necessity to disseminate the findings as quickly as possible, including the preliminary results, for their prompt utilization, and, on the other hand, the academic legitimacy of the scientific publication that, among other criteria, includes that of originality. Eventually, a conflict can be observed between the two aspects, such that predominance of one of them usually comes at the expense of the other. This balance also applies to the *Pan American Journal of Public Health*, which should have a policy that takes into consideration 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 training of researchers, and it is very important that its achievements are not lost but expanded.

8- The Jacques Parisot Foundation Award

The Jacques Parisot Foundation Award consists of a grant of US\$ 5,000 to finance a research proposal, which is given every two years by WHO to researchers of one of the Regions on a rotation basis. In 2003, it was the turn of the Region of the Americas to present candidates. The competition theme is selected by the corresponding Regional Director, and Dr. Roses selected the theme “Healthy Environments for Children” that coincided with the theme of World Health Day 2003.

The ACHR reviews the proposals and makes a recommendation to the WHO Regional Committee for the Americas. This year, because the ACHR took place after the Regional Committee, the 56th WHO Regional Committee in 2004 will consider the proposals and forward its recommendation, according to the Foundation regulations, to the selection panel. This panel will meet during the WHO Executive Board in January 2005 and give the Board its recommendation for a final decision.

PAHO's Research Promotion and Development Unit sent letters announcing the competition to all the ministries of health, all PAHO/WHO Country Representatives, and in addition placed an announcement on 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 were in charge of reviewing the proposals and selected two. Their first recommendation went to the project "The Emerging Impact of HIV/AIDS on Children and AIDS Orphanhood in Barbados," presented by Dr. Alok Kumar of the Queen Elizabeth Hospital in Barbados. As a second choice, they selected the project "Reemerging Parasitic Diseases among Children in Day Care Centers of Montevideo, Uruguay" by Dr. Ana María Acuña Zúñiga of the Medical School of the University of the Republic of Uruguay. The ACHR endorsed these recommendations.

ANNEXES

**Welcoming Remarks at the Meeting of the Pan American Health Organization's
Advisory Committee on Health Research Washington, 2 November 2003**

By: Jorge E. Allende

Dr. Mirta Roses, Director of PAHO
PAHO Officials
Members of the Advisory Committee on Health Research
Observers and Special Guests

It is a privilege and a pleasure to welcome you all to this meeting of the ACHR and thank you for attending.

This meeting has special significance. We are beginning the ACHR's relationship with our new Director, Dr. Mirta Roses, and will have the opportunity to become acquainted with her ideas and the direction in which she wishes to steer the Committee in its primary function, which is none other than to advise the Director of PAHO on health research. This also marks a beginning for several new members of the Committee, to whom we of course offer a hearty welcome, with the certainty that all of you will make a significant contribution to the work and deliberations of our Committee. Finally, it is the start of Dr. Víctor Pechaszadeh's tenure as Chairman of the ACHR. Knowing and admiring him, I am certain that with his leadership, he will perform his duties with great skill and success.

As for me, this meeting marks the end of my participation in the ACHR. I am therefore taking the liberty of extending my comments beyond the usual words of welcome.

First, I would like to say that it has been a great honor for me to serve on this Committee for five years, four of them as Chairman. It has been an honor to have enjoyed the confidence of Dr. George Alleyne for much of this time and of the new Director in recent months. PAHO is now a century-old institution with so important and remarkable a history of service to health in our Hemisphere that to have been given the opportunity to serve it is both a source of pride and an honor; it has been a privilege and a pleasure to preside over so outstanding a group of people as the members of the Committee, with whom we have, happily, developed a close friendship.

Special mention should be made of the people with whom we have had the most contact on the Committee: Alberto Pellegrini and Rebecca de los Ríos, who have shown us the way with great wisdom and dedication, demonstrating their enormous personal commitment. There is no doubt that our work has been facilitated and encouraged by Alberto and Rebecca.

If we consider PAHO's efforts in the field of research during our tenure on the ACHR, we can point to many things, but in my view, something new of the utmost importance has been the growing rapprochement between the Organization and the ONCyTs, which began in 1998 at the ACHR meeting in Caracas, in which five ONCyTs participated. This is a key point, since the National Science and Technology Research Councils are the institutions in Latin

America with the primary responsibility and greatest resources to act in this area. PAHO has moved from rapprochement to clear cooperation in the form of agreements with several ONCyTs on health research and human resources education, culminating in the establishment of the SCienTI Network with 10 ONCyTs from the Region. This Network will transform the history of science and technology development and cooperation in Latin America, since for the first time, we will have a database with all the researchers and all the projects under way in the Region. This information will be indispensable for fulfilling the grand aspiration of formulating regional policies and ambitious projects capable of integrating our forces to solve the main health problems of Latin America's peoples. We must continue to foster the relationship of PAHO and the ACHR with the ONCyTs.

Extremely important to this integration effort has been the support of the Research Grants Program for multicenter projects. This is a good example of how the capacities of several countries and institutions can be coordinated to complement one another. In the same vein of joining forces and building partnerships, we must mention the agreements signed with highly prestigious technical institutions such as Harvard University, the U.S. National Institutes of Health, and the Carlos III Institute of Health of Spain. These agreements have opened new fundamental opportunities for training young health researchers in our countries.

Another different yet equally successful partnership has been forged with the Latin American Network of Biological Sciences (RELAB), which represents the important community of investigators in the Region. Successful collaborative research projects on infectious diseases have been carried out with RELAB, and projects to explore environmental impacts on human health are currently under way.

PAHO and RELAB have also entered into an agreement with the *International Centre for Genetic Engineering and Biotechnology* (ICGEB) to develop a joint research program, which has already issued a first call to obtain support for five molecular virology projects to study viral diseases of great import to the Region.

All this is indicative of a policy whose goal is to work with the governments, institutions, and scientists of the Region to promote the use of research as a powerful tool for the solution of health problems and to join the limited resources of PAHO to those of other institutions that share its interests and objectives.

I have been talking about the achievements of the five years in which I have had the pleasure of serving as a member of the ACHR. However, in these five years, the already dramatic advances in the biomedical sciences have made spectacular leaps.

Naturally, these include no less than the complete mapping of the human genome in 2001, which has yielded an avalanche of information that will need to be analyzed and interpreted in the coming years. What is clear is that having all the information on our species and many other species at our disposal has forever changed the biological and health sciences. A shift in research paradigm is occurring that is bringing us to face to face with the alarming complexity of living things, their genetic information, and their interaction with the environment. It couldn't be clearer that in the next few decades we will gain an understanding

of the genetic components of major diseases, cardiovascular and degenerative neurological diseases, diabetes, cancer, and even aging. That understanding will necessarily lead to new therapies and new drugs.

However, biomedical advances over the past five years have not been limited to mapping the genome. Two other important and promising areas have emerged. The first is human stem cells in embryos and adult tissues, an area that in addition to unleashing a bitter ethical controversy over the issue of embryonic stem-cell research, has brought the promise of cellular therapies to repair damaged tissues.

The second, of enormous importance, had its origins in a little worm, *Caenorhabditis elegans*, in which RNA interference was first discovered in 1998. In just a few years, this finding has shown that it is possible to effectively silence specific genes in plants and animals. In addition to being a highly useful technique for investigating the function of any gene in cells and complete organisms, it has yielded very promising results in controlling the replication of viruses, including those that cause hepatitis, polio, and AIDS.

In the past two years, humanity has been subjected to two horrifying threats: bioterrorism and the SARS virus.

Both experiences have made crystal clear the need for surveillance systems, epidemiological monitoring, and direct contact with political authorities. Last year, during the extraordinary celebration of the PAHO centennial, a splendid symposium highlighted numerous examples of past achievements and future possibilities in the area of health research.

What conclusions can we draw from all this?

Many, but one is obvious and highly relevant for the ACHR agenda of this meeting and in the coming years: the imperative that our institution, PAHO, and the countries of the Americas whom it represents, strengthen their commitment and step up their activities in health research. Only by generating relevant new knowledge for health will we be able to fulfill our mission of providing evidence-based medicine and take advantage of the extraordinarily powerful tool of science to solve our most pressing problems.

The widening gulf between the countries that generate and apply scientific knowledge and those that sit on the sidelines as mere spectators should not continue to divide our peoples. PAHO must be an active and convincing agent to encourage the governments and countries to invest and participate in this activity so important for our peoples, and the ACHR must identify opportunities and serve as a catalyst for cooperation activities to bolster these efforts.

I am certain that in the coming years, PAHO and the ACHR will faithfully fulfill this mission.

Thank you very much.

REPORT ON THE VISIT TO THE AREA OF SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH (AD/SDE)

Dr. Miguel Laufer–ACHR

The visit to the Area of Sustainable Development and Environmental Health made it possible to learn about the activities and research that are carried out in the three units into which the previous Environmental Health and Health Promotion units have recently been grouped.

- Risk Assessment – Maritza Tennessee, Alberto Concha, Heather Selin, and Jaime Pérez
- Healthy Localities – Josefa Ippólito, Marilyn Curls
- Local and Urban Development – Paulo César Pinto

The activities of the area have evolved from a specific approach to sanitary problems to one with a social orientation, with emphasis on children and workers, where society organization becomes the central objective of the search for comprehensive health within a systemic or holistic concept.

Research is clearly the basis of the area activities, always of the applied type about the existing situation and evaluation of the findings, and all the units acknowledge and value it. However, doing research is not PAHO's role and the area does not have the resources for it, which means that the studies are conducted by means of "strategies" in:

- Assigned PAHO Centers, like CEPIS (Lima) and INCAP (Guatemala), of long trajectory in research and education.
- Association with some 30 collaborating centers in the countries, where courses and studies are offered.
- Networks as the Ibero-American Healthy Housing Network.

Several examples of outstanding research ("highlights") conducted within the projects and developed programs in the area were presented:

- Activities of the Ibero-American Healthy Housing Network in eight countries.
- Sectoral analyses of the waters and solid waste situation since 1993, in more than 15 countries, with financial support from IDB, USAID and others.
- Evaluations of projects of the Health-Promoting Schools in Central America and in the Caribbean.
- Regional evaluations of drinking water (2000) and of solid waste management services (2002).
- Standardization of criteria and questionnaires to harmonize studies in different countries and regions in the "Global Youth Tobacco Survey."

In all these activities, the highlight is their implementation through working groups, collaborating centers, associated institutions, and other forms of collaboration. Its coordinating capacity and

experience in negotiating with official entities of the health sector in the countries is what gives PAHO an exceptional capacity in research promotion.

Conclusions:

- All the units of the Area utilize and value research.
- These activities motivate conducting and evaluating research in the countries, but there is no financing capability.
- Most of the publications are domestic, either PAHO's or of the institutions or agencies involved.

Recommendations:

- Emphasize the importance of publications in disseminating the experiences.
- Increase use of the VHL.
- Promote publication of works by Area staff.
- Multiply the efforts for disseminating mechanisms of study, assessment, and validation unified in the Region and compatible with those performed abroad.

REPORT OF THE VISIT TO THE AREA OF STRATEGIC HEALTH DEVELOPMENT (DPM/SHD)

Dr. Victor B. Penchaszadeh and Dr. Andre Pierre Contandriopoulos - ACHR

The visit to the Area comprised its two Units: The Unit of Human Resources Development and the Unit of Health Policies and Systems.

A. Report on the Unit of Human Resources Development **Dr. Victor B. Penchaszadeh**

We were received by the members of the Unit, Drs. Charles Godue, Monica Padilla, Silvina Malvares and Felix Rigoli. The following activities were discussed:

1. Research activities in human resources policies

The Unit recognizes that this field is very influenced by external factors, values and corporate interests and market structure, such as training opportunities, employment, migrations, etc. The following are some of the research activities in this field, primarily through the Observatory of Human Resources in the Region:

- a) Surveys to health service providers, to learn their needs
- b) Studies on incentive systems
- c) The impact of labor flexibility on the quality of work by health professionals
- d) Health issues of health workers, occupational health, in view of the deterioration of work conditions
- e) Role of professional associations and unions in determining working conditions
- f) Migration of health workers: talent drain to developed countries and from poor-rural areas to wealthier-urban areas within countries
- g) Methods for the allocation of human resources within countries, role of government
- h) Evaluation of in-service training and outcome evaluation of graduates

2. Research activities in nursing

- a) Development of a database of information on nursing schools in the Region. There are already nearly one thousand schools in the database (600 in North America and 400 in Latin America and the Caribbean).
- b) Registry of Nursing Associations, both academic and professional.
- c) Research on policies and regulations in nursing in different countries of the Region
- d) Professionalization of nurse auxiliaries in relation to the health sector reforms.
- e) Development of educational contents in public health

- f) Composition, dynamics and migration patterns of the nursing workforce, using a standardized system of basic data

3. Research activities in human resources in Public Health

An important emphasis in this area has been taking place over the past few years, with special attention to the following research questions:

- a) knowledge about the capabilities and infrastructure of the public health workforce in the Region
- b) Elucidation of the educational competencies required to implement the 11 essential public health functions defined by the Organization
- c) Integration of public health functions and primary health care
- d) Mandate of health authorities in the Region as it pertains to public health and training of the public health workforce
- e) Evaluation outcomes of the training of the public health workforce by the Schools of Public Health. Study of the insertion of graduates in the workforce, in conjunction with the Latin American Association of Public Health Schools

4. Comments:

The activities of the Unit of Human Resources Development were found to be comprehensive and on target according to the needs of the Region. We were well impressed with the coordination of functions and the knowledge of the situation of human resources policies in the Region.

B. Report of activities of the Unit of Health Policies and Systems
Dr. Andre Pierre Contandriopoulos

Six (6) persons were present at the meeting:

Monica **BOLIS** : Legislation and Regulation, Chief of the Unit

Cristina **PUNTES-MARKIDES** : Health Policy and Planning

Maria Soledad **URRUTIA** and María Cecilia **ACUÑA**: Social Protection and Health

Ruben **SUAREZ** : Health and Economic Development

Oscar **FEO**: Public Health: role and functions

Each of them explained what they were working on.

Monica Bolis explained what the big challenges for legislation and regulation are. She defined areas in which research is needed:

- Impacts of immigration on the health care system;
- Roles of the NGOs in the health field;
- Comparative legislation analysis.

Cristina Puentes-Markides (Health politics and health objectives) presented what she wants to develop under the general subject of health politics at State level. She insisted on the importance of revisiting the planning concept and to work on the policy building process.

She is not doing any research. She feels that her responsibility is to respond to the preoccupations of various countries.

Oscar Feo presented what has been done about the practice of public health in America. He has been working on the economic dimensions of public health:

- expenditures in public health;
- cost of implementing the eleven (11) essential functions of public health.

Ruben Suarez presented the research programs that he is conducting and coordinating about the relations between Health/Nutrition, Economic Development and Social Development.

Nutrition and Health seems to be a factor of economic development at the macro level and not the inverse. So, it is wise to invest in health in order to generate economic growth.

Maria Cecilia Acuña and **Maria Soledad Urrutia** presented their work around the theme: Social Protection and Health.

They have developed a method for measuring the level of exclusion in a society. They use the information on exclusion in different countries to show that it will be necessary to intervene. They promote the idea of developing social dialogue.

REMARKS:

- 1) The team has a good mix of expertise (law, medicine, health administration, economics, social-psychology, etc.). Everyone seems dedicated to his or her work.
- 2) Knowledge and information play three different roles in their activities:
 - they produce information and knowledge;
 - they use information and knowledge to develop new interventions;
 - they define the information needed to improve the decision in the health sector.
- 3) The articulation between the description given in the paper prepared for the visit and what people are doing is not clear. We regret that Pedro Brito was not able to demonstrate how he sees the integration of activities in the health policy area and how he is planning to integrate the different teams.
- 4) It is difficult to appreciate the links between the Unit on Health Policies and Systems, and the Unit on Human Resources, and their links with other areas.
- 5) Two positions seem to co-exist within the team in regard to their role as PAHO members:
 - neutrality: “we give all the information and the country is free to choose” and
 - activism: “we have to develop strategies in order to induce change”.

It might be important to explicitly discuss these positions.

REPORT ON THE VISIT TO THE AREA OF DISEASE PREVENTION AND CONTROL (AD/DPC)

Dr. Jorge Allende and Dr. Jorge Gaviñondo - ACHR

Units Visited

- Communicable Diseases:
 - Zaida E. Yadón
 - Marlo Libel

- Noncommunicable Diseases
 - Merle J. Lewis and collaborators

- Veterinary Medicine and Dietary Safety
 - Maria Cristina Schneider
 - Genaro W. García

Communicable Diseases

- Have a person devoted to research.
- This person's actions are totally coordinated with TDR/WHO, which is almost its exclusive source of financing (i.e. Chagas).
- The existing teamwork between this responsible person and the different units in charge of the control programs is clearly perceived.
- The type of research promoted and carried out is basically operational.
- Their job is performed using individual subsidies for projects (seed money) and by organizing workshops directed primarily to the preparation and level rising of projects that are presented for competition.
- These activities seem to be well founded and organized in regard to subjects and priority countries.
- It was observed that the projects supported by the unit have helped create human capabilities, and have had certain impact (still insufficient) on the adoption of health policies by governments.
- The projects have helped the creation of networks (Malaria), and links with institutions that contribute discreet additional subsidies (SSI).
- The interviewees find necessary to reinforce inter-programming coordination with the Unit of Research Promotion and Development.
- There is also interest in improving links with the Bioethics Center, in view of the type of research promoted, and the content of the control programs carried out.

Chronic Diseases

- There is no one assigned to research, these activities are set forth by the persons responsible for the control programs themselves.
- As their main research themes they have cervical cancer and diabetes types I and II.
- The type of research they promote is basically operational, focused mainly to studies of cost-effectiveness and related social aspects.
- These activities seem to be well founded and organized in terms of their subjects and the priority countries.
- Thanks to a grant of the Gates Foundation, they conduct research in CCU, in coordination with other agencies and institutions, among them the IARC, PATH, Hopkins, etc.
- This project is directed primarily to evaluate the screening of alternatives that may support national control programs (Peru).
- It also investigates risks based on people behavior, and contributes data necessary for the preparation of possible vaccination processes.
- In diabetes they rely on the Americas Declaration on Diabetes, and are also based on external grants for monitoring in Central America and the Caribbean.
- They emphasize a country to country “approach”, related to the existence or not of knowledge about the national status and of control programs.
- They find it necessary to strengthen the inter-programming coordination with the Unit of Research Promotion and Development .
- They do not have a PAHO budget for research.

Veterinary Medicine and Dietary Safety

- They do not carry out research activities precisely; instead they make an important monitoring of zoonosis and activities related to the food safety issue. They are active in publishing.
- They do not have funds allocated for research. Have found support ultimately in institutions of the U.S., in connections with WHO, and in an important association with PANAFTOSA in Brazil and INPPAZ in Argentina.
- They expressed interest and the need for greater coordination with other Areas that develop programs related to zoonosis and/or food safety.

Observations

- There is motivation to carry on research programs despite the non-existence of budget appropriations to this end by PAHO.
- Efforts made are directed to relevant problems.
- Projects take into consideration the directives concerning the priority countries.
- Research conducted is almost exclusively related to operational aspects of possible impact on the decision-making by health authorities.
- The interrelationship among the different Areas is insufficient, as well as with the Unit of Research Promotion and Development (IKM/RC) for the generation and development of research activities.
- There is some work of specialists training linked to subjects of projects of operational research, not so in other sciences closely related to the subject matters being addressed (microbiology and immunology).

Recommendations

- We consider that an organization like PAHO, with the mission of promoting health in the hemisphere, must be maintained active in research both for the best application of knowledge as for its generation, and in training human resources for this purpose.
- Research in PAHO requires a budget to cover projects fostered by the Areas, and to allow the creation of capabilities and to promote cooperation.
- It would be advisable to analyze organizational ways to promote, control and apply research in PAHO, increasing its effectiveness.
- It would be very advisable to hold biannual internal Workshops on Research where the different Areas and IKM/RC may display their findings, in order to improve knowledge, and to coordinate and complement efforts.
- In order to improve research projection, and as a way to be more directly linked to the community of experimental, clinical, and social researchers, PAHO should participate actively in regional congresses organized and sponsored by different associations and networks.
- The ACHR agenda could include periodic presentations about the development and findings of the different Areas research tasks, in addition to those developed by IKM/RC.
- Considering the impact that science and technology have in the speedy application of laboratory findings in the form of health products and services, periodically, the ACHR should review progresses in biology, genetics, and biotechnology.
- To this end the ACHR agenda could include conferences about the beginning and end addressed by these aspects.

REPORT ON THE VISIT TO THE AREA OF FAMILY AND COMMUNITY HEALTH (AD/FCH)

Dr. Ligia de Salazar and Dr. Luis Rosero-Bixby - ACHR

UNITS

- Immunizations
- Nutrition
- Child and Adolescent Health
- Women and Maternal Health
- HIV AIDS - Sexually Transmitted Diseases

ENFASIS IN RESEARCH

Problem knowledge
Services: quality, access, and coverage
Impact assessment: evidence
Dissemination and use of findings
Participation: networks and partnerships

TYPE OF RESEARCH

BASIC AND APPLIED

- Collaborative
- Expanding Knowledge
- Quality Construction
- Dissemination of findings

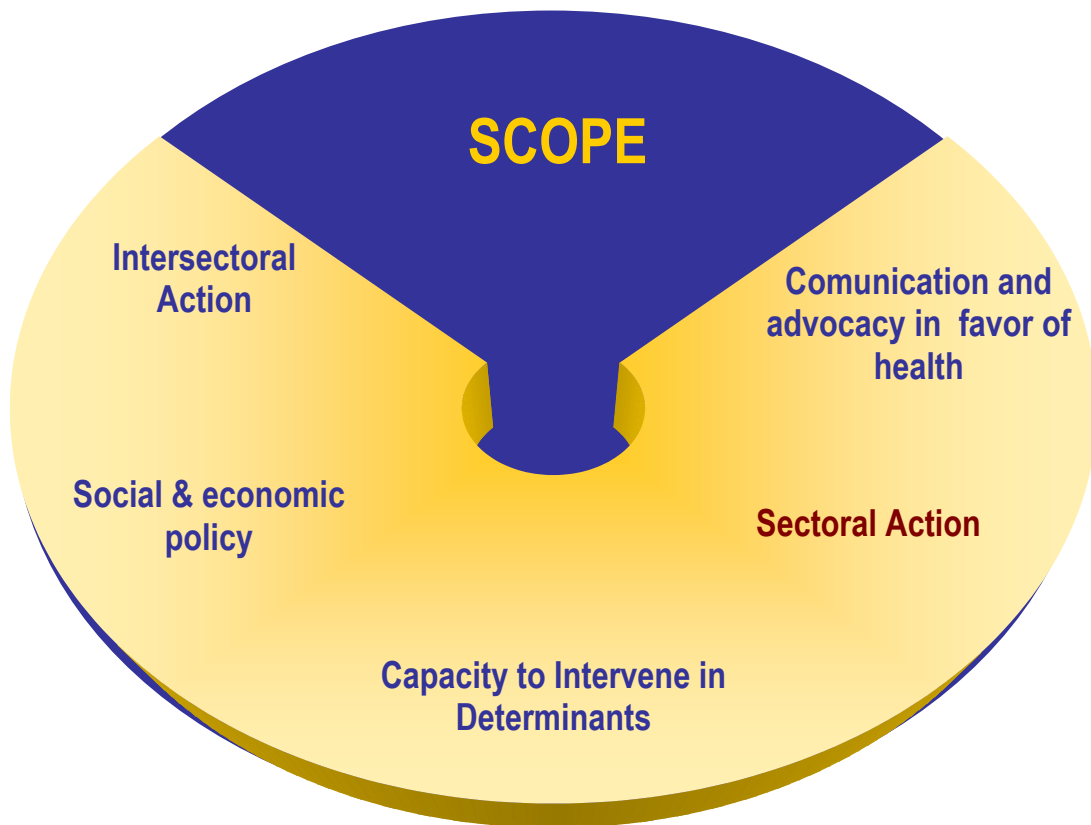
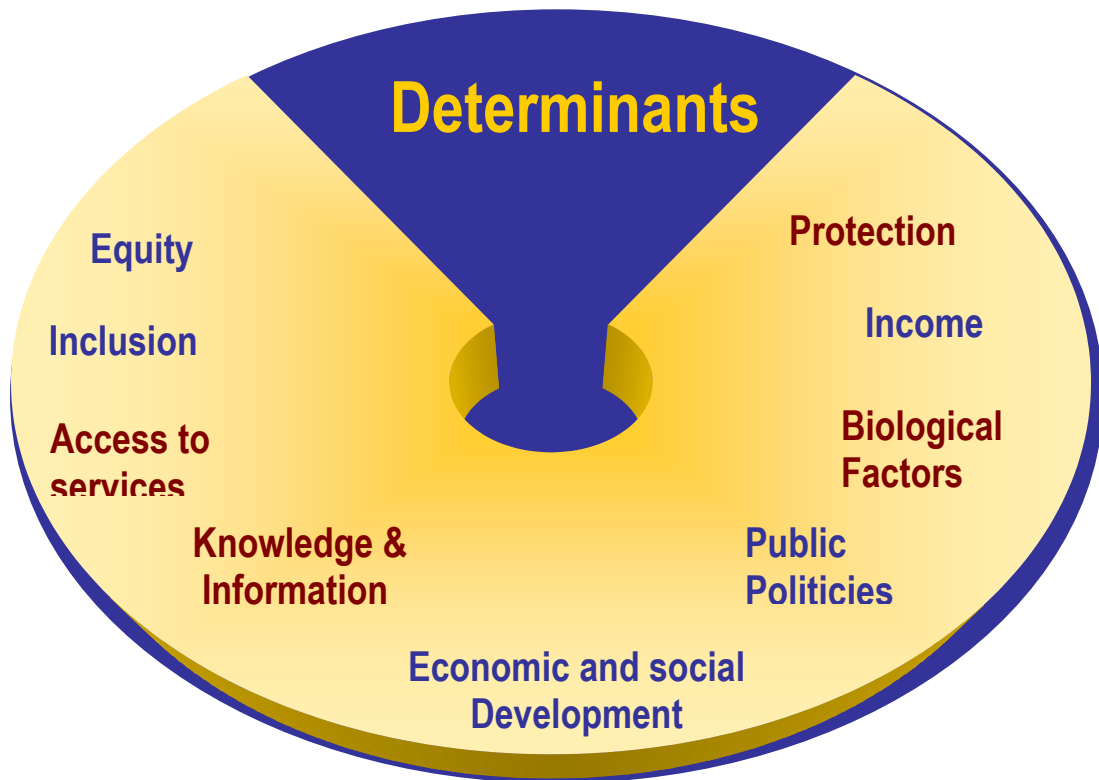
PRIORITIES

1. Increase access to comprehensive health care services institutional and communal
2. Strengthen processes and expansion mechanisms of basic coverage services

STRATEGIES

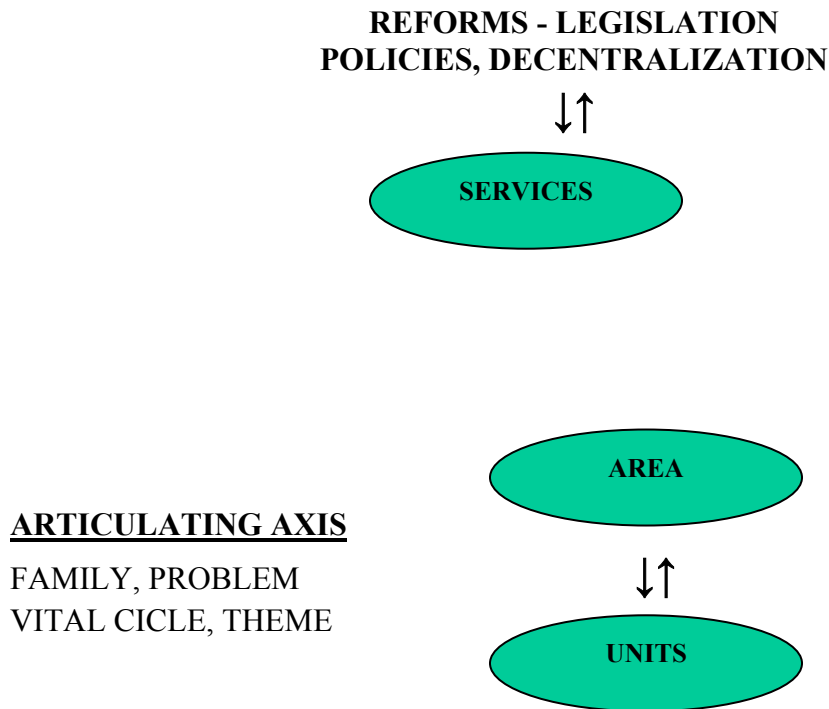
1. **ARTICULATED WORK**
Internal and external to socialize research findings
2. **PROMOTING PARTICIPATION**
Universities
Ministries of Health
Research Institutions
Community

REFLECTIONS



If orientation is toward the delivery of services, why is the impact evaluation of health reforms not included?

- QUALITY
- ACCESS
- COMPREHENSIVENESS
- ESSENTIAL FUNCTIONS



PRIORITIES DEFINITION

- Coherence with priorities of other areas, PAHO offices, and countries governments
- Intersectoral planning
- Participation in the research process

DECISIONMAKERS, FINANCING INSTITUTIONS, SERVICE PROVIDERS AND BENEFICIARIES HAVE DIFFERENCES IN:

- Thinking
- Language
- Motives
- Organizational limitations
- Incentives
- Standpoints.



**Pan American
Health
Organization**

*Regional Office of the
World Health Organization*

Celebrating 100 years of Health

ACHR 38/2003.1
Original: English/Spanish

38th MEETING OF THE ADVISORY COMMITTEE ON HEALTH RESEARCH

Agenda

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

**38th Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington D.C.**

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 |

**38th Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington D.C.**

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: Drs. Jorge Gavilondo and 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: Drs. Ligia de Salazar and 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: Drs. Victor Penchaszadeh and André Contandriopoulos

**38th Meeting of the Advisory Committee on Health Research
3 to 5 November 2003, Washington D.C.**

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 García, PAHO Deputy Director



38th 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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³ Secretary ACHR

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) Interacademy 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	√	√