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OF THE EXECUTIVE COMMITTEE**

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**NON-STATE ACTORS IN
OFFICIAL RELATIONS WITH PAHO**

Introduction

1. At the 55th Directing Council, Member States of the Pan American Health Organization (PAHO) adopted the Framework of Engagement with non-State Actors (FENSA) via Resolution CD55.R3 (September 2016). Through this resolution, the PAHO Member States specifically replaced the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations with FENSA. They also requested the Director of the Pan American Sanitary Bureau (“the Bureau”) to implement FENSA in a manner consistent with PAHO’s constitutional legal framework and to report annually to the Executive Committee through its Subcommittee on Program, Budget, and Administration (SPBA).
2. “Official relations” is a privilege that the Executive Committee may grant to nongovernmental organizations, international business associations, and philanthropic foundations that have had, and continue to have, sustained and systematic engagement with PAHO that is assessed by both parties as being mutually beneficial. Entities in official relations with PAHO should be regional in membership and/or scope and should have a constitution or similar basic document, an established headquarters, a governing body, and an administrative structure.
3. Official relations are based on a three-year plan for collaboration with PAHO that has been developed and agreed on jointly by the non-State actor and PAHO. The three-year plan is structured in accordance with the PAHO Strategic Plan and cannot be primarily of a commercial or for-profit nature.
4. PAHO’s Executive Committee, through the SPBA, considers applications for admitting non-State actors into official relations. It is also responsible for reviewing PAHO collaboration with each non-State actor in official relations every three years, at

* This document has been revised to provide additional information in Annex A.

decision to the following year. In addition, the Executive Committee may decide to discontinue official relations with a non-State actor if it considers that such relations are no longer appropriate or necessary in light of changing programs or other circumstances. Similarly, the Executive Committee may discontinue official relations if an organization no longer meets the criteria that applied at the time the relations were established, fails to provide updated information or report on the collaboration, or fails to fulfill its part in the agreed program of collaboration.

5. To support the Executive Committee in fulfilling this mandate, the Bureau examines the applications received for admission into official relations with PAHO, as well as proposals from those non-State actors set to renew their designation, in order to ensure that the established criteria and other requirements are met. The Bureau examines the collaboration with each non-State actor over the past three years and the jointly agreed plans for the next three years. The Bureau also identifies which of the four specific policies included in FENSA (i.e., those related to nongovernmental organizations, private sector entities, philanthropic foundations, or academic institutions) applies to each non-State actor. If a non-State actor no longer qualifies for official relations, the Bureau will contact the organization to allow it to decide whether it would like to adjust its policies, governance, or funding in a manner that would allow it to qualify again. Otherwise, the Bureau will propose the discontinuation of official relations with the entity.

6. On the basis of the foregoing, the SPBA is invited to consider the applications for admittance into official relations from two non-State actors and to review the collaboration with 11 non-State actors in the context of their triennial review.¹

Applications of Non-State Actors for Admittance into Official Relations with PAHO

7. Based on its review of applications for admission into official relations, the Bureau considered that the applications from the following two non-State actors meet the requirements and are therefore presented for consideration by the Executive Committee through the SPBA: the Drugs for Neglected Diseases initiative – Latin America, and Action on Smoking and Health.

8. Annex A provides information on the application for admittance into official relations with PAHO from the aforementioned non-state actors.

Triennial Review of Non-State Actors in Official Relations with PAHO

9. Currently, there are 26 non-State actors in official relations with PAHO. The Bureau conducts an assessment of each entity when its official relations status comes up for renewal, with approximately one-third of the non-State actors to be assessed each

¹ One of which was deferred by one year, in accordance with Resolution CE160.R5 (June 2017), and is included in this review.

year. This year, 11 entities are up for renewal: American College of Healthcare Executives; American Speech-Language-Hearing Association; Consumers International Regional Office for Latin America and the Caribbean; Latin American Confederation of Clinical Biochemistry; Latin American Federation of the Pharmaceutical Industry; EMBARQ, part of the World Resources Institute Ross Center for Sustainable Cities; Framework Convention Alliance; InterAmerican Heart Foundation; National Alliance for Hispanic Health; Sabin Vaccine Institute; and Latin American Society of Nephrology and Hypertension.

10. As a result of its review, the Bureau recommends that the Executive Committee:
 - a) continue official relations with the following seven non-State actors: American Speech-Language-Hearing Association; Latin American Federation of the Pharmaceutical Industry; Framework Convention Alliance; InterAmerican Heart Foundation; National Alliance for Hispanic Health; Sabin Vaccine Institute; and Latin American Society of Nephrology and Hypertension;
 - b) defer review of the following three non-State actors to permit time to finalize new plans of collaboration without compromising existing engagement: American College of Healthcare Executives; Latin American Confederation of Clinical Biochemistry; and World Resources Institute Ross Center for Sustainable Cities/EMBARQ;
 - c) discontinue official relations with Consumers International Regional Office for Latin America and the Caribbean, in light of the lack of collaboration over the past three years.
11. Detailed supplementary background documents on each non-State actor mentioned above will be provided separately for consideration by the SPBA.
12. Annex B provides information on PAHO collaboration with the 11 entities that are due for renewal. Annex C presents a progress report on the status of ongoing relations with each of the remaining non-State actors in official relations with PAHO, and Annex D provides the Schedule of SPBA Reviews of all Organizations in Official Relations with PAHO.

Action by the Subcommittee on Program, Budget, and Administration

13. The SPBA is invited to consider recommending that the Executive Committee:
 - a) admit two new non-State actors into official relations with PAHO : the Drugs for Neglected Diseases initiative – Latin America, and Action on Smoking and Health;
 - b) commend the following seven non-State actors for their continuing contribution to the achievement of PAHO's objectives and recommend that the Executive Committee maintain PAHO's official relations with the following non-State

- actors: American Speech-Language-Hearing Association; Latin American Federation of the Pharmaceutical Industry; Framework Convention Alliance; InterAmerican Heart Foundation; National Alliance for Hispanic Health; Sabin Vaccine Institute; and Latin American Society of Nephrology and Hypertension;
- c) defer a decision on the following three non-State actors: American College of Healthcare Executives; Latin American Confederation of Clinical Biochemistry; and EMBARQ, part of the World Resources Institute Ross Center for Sustainable Cities/;
 - d) discontinue official relations with the Consumers International Regional Office for Latin America and the Caribbean.

Annexes

Annex A

APPLICATIONS OF NON-STATE ACTORS FOR ADMISSION INTO OFFICIAL RELATIONS WITH PAHO

Drugs for Neglected Diseases initiative-Latin America

1. The Drugs for Neglected Diseases initiative (DNDi) is a collaborative, patients' needs-driven, nonprofit drug research and development organization that supports the development of new treatments for neglected diseases. It seeks to improve the quality of life and the health of people suffering from neglected diseases by using an alternative model to develop drugs for these diseases, and by ensuring equitable access to new and field-relevant health tools. In this not-for-profit model, driven by the public sector, a variety of players collaborate to raise awareness of the need to research and develop drugs for those neglected diseases that fall outside the scope of market-driven research and development. The World Health Organization (WHO), through its Special Programme for Research and Training in Tropical Diseases, is a founding member and close partner of DNDi, serving as a permanent observer of DNDi's Board of Directors. DNDi is in official relations status with WHO.
 2. A DNDi Latin America office was opened in 2004 with the primary aim of supporting regional research and development activities for Chagas disease, malaria, and leishmaniasis. The Latin America office also undertakes advocacy and communications activities to increase awareness of neglected diseases in the Region. In 2011, a regional Board of Directors was established.
 3. Over the last three years, the following activities have been carried out jointly between DNDi – Latin America and PAHO:
 - a) Neglected tropical diseases (NTDs): Joint advocacy efforts to build political will to tackle NTDs in the Region and joint participation in NTD events in the Region.
 - b) Malaria: Support for access to antimalarial medicines.
 - c) Chagas: Support for increased availability of pediatric benznidazole; joint development of a demand-forecasting methodology for Chagas medicines; joint publications; and collaboration on capacity-building activities, including the Chagas Clinical Research Platform.
 - d) Leishmaniasis: Collaboration on capacity-building activities, including the Network of Investigators and Collaborators in Leishmaniasis known as redeLEISH, as well as on relevant publications.
 - e) Research and development: Discussions on alternative models of research and development to address the lack of innovation for treating NTDs.
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4. The following activities are proposed for the next three years under the DNDi/PAHO collaborative work plan:

- a) Leishmaniasis collaboration: Contribute to PAHO's Plan of Action to Strengthen the Surveillance and Control of Leishmaniasis in the Americas 2017-2022 by supporting the development of new treatment options for cutaneous leishmaniasis, mucocutaneous leishmaniasis, visceral leishmaniasis (VL), and HIV-VL, and by improving access to leishmaniasis treatment options in Latin America.
- b) Chagas disease collaboration: Based on the targets of the Sustainable Health Agenda for the Americas 2018–2030 (Document CSP29/6, Rev. 3 [2017]), undertake multiple joint actions to support PAHO's efforts to *i)* contribute through collaboration with countries to the PAHO Framework for elimination of mother-to-child transmission of HIV, syphilis, hepatitis B, and Chagas (EMTCT-Plus); *ii)* support the testing and piloting of new strategies and technologies to improve and accelerate access to quality clinical management of patients with Chagas disease and their families (multiplex and new laboratory techniques for diagnosis of Chagas that offer better safety, validity, and efficacy); *iii)* develop and implement integrated strategies to document, identify, manage, prevent, control, and eliminate priority infectious diseases in select countries of the Americas; *iv)* maintain a dynamic platform of discussion regarding new alternatives for treatment of Chagas disease and assessment of the response; and *v)* develop a plan based on implementation research to translate new tools for the health system.
- c) Health Systems and Services/Medicines and Health Technologies collaboration: *i)* Contribute to increased awareness and implementation of alternative models of research and development, including open innovation collaborative approaches that meet patients' needs; *ii)* adoption of alternative and delinked models of research and development to contribute to innovation and access while ensuring users are not exposed to financial hardship; and *iii)* strengthening collaboration with Member States and PAHO's Strategic Fund for demand forecasting and access to medicines, especially for NTDs.
- d) Viral hepatitis collaboration: the Region of Americas accounts for approximately 10% of the global burden of hepatitis C virus (HCV). PAHO Member States have showed leadership in tackling this public health challenge by approving a Plan of Action for the Prevention and Control of Viral Hepatitis (2016-2019) (Document CD54/13, Rev. 1 [2015]). While new direct acting antiviral therapies for hepatitis C cure over 95% of those affected, to date the absolute number of individuals living with hepatitis who have had access to effective direct-acting antiviral (DAA) therapy is low in Latin America and the Caribbean. The collaboration's objective is to increase access to quality diagnosis, care, and treatment for hepatitis C through accelerating access to affordable DAA therapy to health systems; innovative models of HCV diagnosis, care, and treatment; and the scale-up of national public health-based hepatitis responses.

Action on Smoking and Health

5. Action on Smoking and Health (ASH) is a not-for-profit organization founded in 1967 that works closely with its allies to ensure that the public health community addresses the tobacco epidemic in a unified and coherent manner. ASH envisions a world free of tobacco-related damage, disease, and death. This is accomplished by taking action to educate the public and decision makers, tracking the tobacco industry, and working for sensible public policies at the local, national, and global levels. ASH's mission is to be a prime mover in domestic and global tobacco control through advocacy, communication, and the force of law.

6. ASH has worked closely with PAHO since the early 2000s on several initiatives related to tobacco control, the WHO Framework Convention on Tobacco Control (FCTC), noncommunicable diseases (NCDs), and sustainable development. Over the last three years, ASH and PAHO carried out several joint activities:

- a) In 2015, ASH served as the Secretariat for the Framework Convention Alliance (FCA), and ASH's Director has served as FCA Director.
- b) In coordination with PAHO, ASH helped secure funds for and provided support to the FCA regional program of the Americas. In this capacity, ASH supported and participated in numerous tobacco control and NCD-related events in the Region and also supported the FCA's work around WHO FCTC processes.
- c) The ASH Executive Director participated in the PAHO Pan American Forum for Action on NCDs.

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

- a) With a view to supporting tobacco control initiatives, ASH will work with PAHO to strengthen the effectiveness of NCD platforms. ASH will lend its expertise and networking abilities for the creation of advocacy documents and webinars and the dissemination of such materials through its networks.
- b) To promote implementation of the Strategy and Plan of Action to Strengthen Tobacco Control in the Region of the Americas 2018-2022 (Document CSP29/11 [2017]), and to advance the use of the WHO Framework Convention on Tobacco Control and other global mechanisms to promote tobacco and nicotine interventions, the PAHO/ASH partnership will focus on the increased inclusion of such mechanisms in local planning, communications, and policies.
- c) PAHO and ASH will make joint efforts to connect tobacco control and human rights mechanisms by promoting the routine inclusion of tobacco in human rights reporting procedures, among other relevant legal actions.

Annex B

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

The Pan American Sanitary Bureau recommends continuation of official relations status for the following seven non-State actors:

American Speech-Language-Hearing Association

1. The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 191,500 members and affiliates seeking to make effective communication a human right that is accessible and achievable for all. Members include audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students. Through its efforts, ASHA seeks to empower and support audiologists, speech-language pathologists, and speech, language, and hearing scientists by advancing science, setting standards, fostering excellence in professional practice, and advocating for its members and those they serve.

2. Over the last three years, activities carried out under the ASHA/PAHO collaborative work plan included joint efforts with the following institutions:

- a) Salvadoran Institute of Complete Rehabilitation (ISRI, for its acronym in Spanish): capacity-building program for personnel working in the field of communication disorders.
- b) National Autonomous University of Honduras (UNAH, for its acronym in Spanish): capacity development program in phonoaudiology (communication disorders).
- c) Guyana Ministry of Health: collaboration to strengthen the national strategic plan for early detection and intervention in communication sciences and disorders.
- d) Paraguay's National Secretariat of Human Rights for Persons with Disabilities: collaboration on communication disorders.
- e) Belize Ministry of Health: technical assistance to the Inspiration Center and its partners to educate health care and community service providers about communication disorders.

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

- a) Collaboration to follow up on technical cooperation with Belize and Paraguay on capacity development in the field of communication disorders.
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- b) Expansion of ASHA-PAHO collaboration on technical cooperation to develop capacities in the field of communication disorders in two new countries.
- c) Joint analysis on the needs of, and services available to, individuals with communication disorders living in Latin America and the Caribbean.

Latin American Federation of the Pharmaceutical Industry

4. The Latin American Federation of the Pharmaceutical Industry (FIFARMA, for its acronym in Spanish) represents 12 pharmaceutical research and development companies and nine local associations of the pharmaceutical industry concerned with pharmaceutical research and development in Latin America. Its mission is to promote public policies that foster innovation and access to high-tech and high-quality medicines that prolong, preserve, and improve the lives of patients in Latin America.

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

- a) Participation in the Directing Council of the Pan American Network for Drug Regulatory Harmonization (PANDRH) to provide feedback on the selection of key discussion topics in the field of regulatory harmonization in the Region of the Americas.
- b) Participation in the Directing Council of PANDRH to provide feedback on the selection of projects and topics to be prioritized and implemented by the network.
- c) Technical feedback and comments on the status of pharmaceutical regulation in the Region of the Americas within the context of PANDRH.
- d) Workshop on vaccine lot release to promote the implementation of WHO's recommendations on quality control and to promote knowledge exchanges and strengthen capacities of national regulatory authorities.

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

- a) Active engagement within the PANDRH framework to provide technical feedback, recommendations, and materials to inform decision making within PANDRH on issues related to pharmaceutical regulation policy.
- b) Creation of support materials and provision of technical advice for the preparation of learning modules in the online course on health regulation of biologicals and biotechnological drugs.

Framework Convention Alliance

7. The Framework Convention Alliance (FCA) was created in 1999 and formally established in 2003. It is made up of nearly 500 organizations from over 100 countries. FCA works on the development, ratification, and implementation of the WHO Framework Convention on Tobacco Control. FCA is also a leading advocate for including the FCTC and global tobacco control in the international health and development framework, including the Sustainable Development Goals that were adopted by the United Nations General Assembly in 2015.

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

- a) Advocacy support to promote implementation of the WHO FCTC at regional and global key meetings.
- b) Advocacy campaign in the lead-up to regional and global key meetings to support implementation of the WHO FCTC by Member States at the regional level.
- c) Collaboration on efforts to support tobacco control in the Region by leveraging the network of civil society advocates, including the promotion of South-South cooperation and the sharing of best practices.

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

- a) Advocacy support to promote implementation of the WHO FCTC focused on political decision makers and supported by online publications, policy briefings, webinars, and reports.
- b) Advocacy support to promote implementation of the WHO FCTC focused on political decision makers and supported by actions toward the establishment of an FCTC compliance mechanism and civil society involvement in monitoring progress toward FCTC implementation in the Region of the Americas.
- c) Advocacy support to promote implementation of the WHO FCTC focused on increased adoption of the FCTC Medium-term strategic plan 2008-2013 by the Conference of the Parties (FCTC governing entity) in the Region of the Americas.
- d) Advocacy support to promote implementation of the WHO FCTC, focused on deepening FCTC integration at the regional level (inclusion of FCTC in national development plans, inclusion of FCTC in the Sustainable Development Goals debate, and efforts to turn global commitments into meaningful national action).

InterAmerican Heart Foundation

10. The InterAmerican Heart Foundation (IAHF) was founded in Mexico City, Mexico in 1994 when representatives from 12 countries in the Americas signed a

statement of intent to become members of the organization. Since then, 36 heart foundations have ratified their membership. Together, these organizations are committed to working to reduce disability and death from cardiovascular disease and stroke in the Americas. IAHF focuses its actions on three primary goals: *a)* to promote an environment throughout the Americas that is conducive to the prevention of heart disease and stroke; *b)* to promote the growth and development of foundations that will take active roles in public education, professional education, public advocacy, and fund raising; and *c)* to foster partnerships between health professionals, business, industry, and other sectors of society for the accomplishment of the IAHF's mission and goals.

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

- a) Collaboration on coalition building and advocacy for obesity prevention in children, including, among other activities, efforts relating to the sugar-sweetened beverages tax in Mexico and efforts to curb consumer campaigns in Colombia.
- b) NCD workshops in 2015 and 2016 focused on the development of positions and strategies for actions by the Healthy Latin America Coalition (CLAS, for its acronym in Spanish), during which several PAHO representatives played an active role.
- c) Collaboration with the health ministries of Bolivia, Costa Rica, Mexico, and Uruguay to support implementation of FCTC Article 14 on smoking cessation through the mapping of tobacco cessation and other advocacy actions.
- d) Collaboration on coalition building and advocacy to promote the reduction of dietary salt in order to reduce hypertension at the population level, through knowledge dissemination on policy evaluation and programs (webinars and listservs) for the reduction of salt consumption in the Americas.

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

- a) Multiple webinars to support the development of a scorecard for monitoring countries' progress on actions in relation to NCDs, to be used at the third United Nations high-level meeting on NCDs in 2018.
- b) Collaboration to support the sustained implementation of FCTC Article 14 on tobacco cessation by continuing to support efforts to achieve tobacco control legislation in Bolivia and working to initiate planning for the 6th Latin American and Caribbean Conference on Tobacco or Health, to be held in Panama in 2020.
- c) Collaboration on coalition building and advocacy to improve nutrition and reduce obesity in the Region of the Americas, including through the reduction of salt intake and increased physical activity, through webinars, capacity building in advocacy for civil society organizations, and promotion of a regional regulatory framework for healthy nutrition.

National Alliance for Hispanic Health

13. The National Alliance for Hispanic Health (NAHH) works to ensure that health incorporates the best of science, culture, and community. It seeks to achieve this by listening to the individual, investing in leading community-based organizations, working with national partners, examining and improving the resources and systems available, and designing solutions to make health a part of each person's life. NAHH continually works to improve the quality of care and its availability to all, and to close the gaps in three key areas: *a)* research, services, and policy; *b)* scientific discovery and benefit for the individual; and *c)* community services and medical practice.

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

- a) PAHO and NAHH, as part of the *Buena Salud Americas* initiative and the Let's Talk about Prevention of Cervical Cancer and Other HPV-Related Diseases initiative, organized a three-day workshop targeting public health experts, community leaders, and government officials to discuss community-based good practices and strategies for improving human papillomavirus (HPV) vaccination uptake, decreasing the incidence of cervical cancer, and sustaining funding to support these priorities.
- b) PAHO, NAHH, and the government of Mexico organized and held a leadership meeting within the context of the *Buena Salud Americas* initiative to promote the prevention of noncommunicable diseases through community-based initiatives.

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

- a) Projects related to the cervical cancer and HPV vaccination community engagement grants initiative, intended to: *i)* identify demonstration programs that address prevention of cervical cancer and increased HPV vaccination in the Region; *ii)* provide capacity building for community-based organizations and civil society groups engaged in advocacy and women's empowerment to prevent cervical cancer and increase HPV vaccination; and *iii)* identify and share successful community-based practices, intersectoral approaches, and resources for capacity building in cervical cancer prevention and HPV vaccination.
- b) Projects related to community-based participation in the prevention and control of NCDs in the Americas, intended to: *i)* identify community-based organization practices and intersectoral approaches to capacity building; *ii)* establish and support public-private partnerships to improve implementation efforts; and *iii)* identify community-based organizations and civil society groups throughout the Americas that are working to advance the prevention and control of NCDs.

- c) Projects related to the utilization of social media to support information dissemination in community-based efforts for the prevention and control of NCDs in the Americas, intended to: *i)* promote knowledge sharing and the use of online communication; *ii)* identify and promote the understanding of different social media platforms and their functionality; and *iii)* promote World Health Day observances by national network partners.

Sabin Vaccine Institute

16. The Sabin Vaccine Institute is a leading advocate for expanding vaccine access and uptake globally, advancing vaccine research and development, and amplifying vaccine knowledge and innovation. Through its work, Sabin helps make vaccines more accessible, enables innovation, and expands immunization across the globe. Sabin is committed to extending the full benefits of immunization to all people, regardless of who they are or where they live, and Sabin works toward this goal by helping bring together national government officials, policy makers, immunization specialists, and researchers and advocates who supply decision makers with the information they need to make evidence-based decisions on vaccines.

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

- a) Efforts (including training and mentorship) and actions were undertaken in the areas of pertussis surveillance in Latin America to strengthen the capacity of national pertussis laboratories and surveillance capacity in Argentina, Brazil, Chile, Colombia, Mexico, and Panama.
- b) In the area of dengue surveillance, a generic protocol was created and surveillance was implemented in eight pilot countries.
- c) In the area of pneumococcal vaccine effectiveness, studies were undertaken and resulted in three published articles.
- d) Efforts are ongoing to tackle neglected infectious diseases in the Gran Chaco region of South America. This collaboration seeks to establish an integrated disease surveillance model in Paraguay.
- e) Joint efforts were made to organize the Regional Meeting on Sentinel Surveillance of Rotavirus, Bacterial Meningitis and Pneumonia in the Latin American Region, held in December 2014 in Panama.

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

- a) Strengthen pertussis surveillance in Latin America and create an assessment of the impact of maternal immunization through the following: *i)* improved surveillance, evaluation, and assessment of countries through laboratory

- capabilities; *ii*) enhanced implementation of surveillance and laboratory training and provision of ongoing technical assistance and mentorship; and *iii*) strengthening laboratory capacity at the country and regional level.
- b) Work to improve the availability of evidence for the prevention of pneumococcal disease by bringing together experts to discuss, evaluate, and interpret available data and studies about pneumococcal and meningococcal disease and immunization to inform approaches for disease prevention among the pediatric and adult populations in the Region.
 - c) Coordinate the development of activities (regional surveillance guide) concerning the prevention of HPV by supporting the gathering of information about the epidemiological profile and burden of HPV-related disease in Latin America.
 - d) Strengthen arbovirus surveillance in Latin American countries through a series of integrated activities to support evidence-based decision making.
 - e) Hold the annual *Ciro de Quadros* vaccinology course in Latin America for immunization managers and journalists.
 - f) Implement activities that focus on rotavirus vaccines and prevention in order to strengthen technical capacity in the Region and promote knowledge exchanges globally.
 - g) Establish a project to strengthen the National Immunization Technical Advisory Groups (NITAGs) in the Region to enhance their abilities to provide evidence-based recommendations for national immunization programs.

Latin American Society of Nephrology and Hypertension

19. The Latin American Society of Nephrology and Hypertension (SLANH, for its acronym in Spanish), founded in 1970, is a scientific body that brings together national nephrology societies of more than 20 countries as well as nephrology physicians of Latin America. The organization works for the renal health of the Latin American population through improved training for nephrologists in the Region and through the promotion and dissemination of scientific advances that support these aims.

20. The following activities were carried out over the past three years under the SLANH/PAHO collaborative work plan:

- a) To support the regional registry of patients in renal replacement therapy (RRT), 11 workshops were held as part of the training program for national registry leadership in Central and South America.
- b) Data reports from the Latin American Dialysis and Renal Transplantation Registry and from national registries were published in the Pan American Journal of Public Health and other scientific research periodicals.

- c) Nearly 9,572 students from across the Region were trained in an online course dealing with the management and prevention of chronic kidney disease in primary health care.

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

- a) Activities to strengthen the technical capacity of national registries of patients in RRT, including two workshops, development of a mechanism to support national registries, and support for the development of national policies, among others.
- b) Elaboration of an online and in-situ course on the development of national registries of patients in RRT in Latin America.
- c) Development of an online course on the prevention and management of chronic renal disease for primary health care teams.
- d) Development of an online course on peritoneal dialysis for primary health care professionals.

The Bureau recommends deferral of a decision on the following three non-State actors:

American College of Healthcare Executives

22. Founded in 1933, American College of Healthcare Executives (ACHE) is an international professional society of more than 40,000 health care executives who lead hospitals, health care systems, and other health care organizations. Among other things, ACHE aims to strengthen health systems based on primary care, focusing health governance and financing toward progressive realization of universal health coverage, promoting access to and rational use of health technologies, facilitating transfer of knowledge and technologies, and developing human resources for health.

23. An evaluation of the collaboration between PAHO and ACHE is currently underway. The results of the evaluation will allow the plan for collaboration to be reframed and strengthened. The Bureau is therefore proposing a deferral of a decision for one year.

Latin American Confederation of Clinical Biochemistry

24. The Latin American Confederation of Clinical Biochemistry (COLABIOCLI) began to take shape in December 1968, during the I Latin American Congress of Clinical Biochemistry held in Mar del Plata, Argentina. The initiative came from a group of professionals belonging to the Federation of Specialists of Biological Analysis of the Province of Buenos Aires (today Biochemical Federation of the Province of Buenos Aires, or FABA). COLABIOCLI was officially constituted five years later, on 28 November 1973, during the II Congress held in Porto Alegre, Brazil. It works for the

continuous improvement of the profession in its ethical, scientific, technical, and economic aspects, serving individuals and society through: *a)* the grouping of national associations that are dedicated to the development of laboratory sciences; *b)* organization and promotion of scientific and professional events, as well as external quality evaluation programs; and *c)* application of accreditation standards and the establishment of graduate programs in the member countries.

25. COLABIOCLI has been in official relations with PAHO for many years and has continuously pursued successful plans for collaboration. To avoid compromising existing engagement, the Bureau proposes to defer a decision on COLABIOCLI for one year to allow COLABIOCLI time to clarify a question on its registration status and finalize the current collaboration plan.

World Resources Institute Ross Center for Sustainable Cities/EMBARQ

26. The World Resources Institute's (WRI) mission is to move human society to live in ways that protect Earth's environment and its capacity to provide for the needs and aspirations of current and future generations. WRI's EMBARQ seeks to align the Institute's operations with its mission. EMBARQ depends on the research and expertise of its staff to guide its actions and is committed to improving and sustaining WRI's environmental performance.

27. The EMBARQ focal point was not able to provide the required documentation in time for the elaboration of this report. The Bureau does not wish to compromise continued engagement, and thus proposes deferring the review of EMBARQ for one year.

The Bureau recommends that official relations be discontinued with the following non-State actor:

Consumers International, Regional Office for Latin America and the Caribbean

28. Consumers International, formerly known as the International Organization of Consumers Unions, was started in 1960 by a group of five consumer organizations from the United States, Western Europe, and Australia. It was originally established as a global information exchange between the increasing numbers of consumer product-testing organizations that had sprung up in the postwar boom years. Today, Consumers International works to ensure that consumers have a powerful voice in the global marketplace.

29. No activities were carried out with Consumers International's Latin American and Caribbean regional office (CI-ROLAC) over the past three years, and no activities are planned for the next three years. Accordingly, the Bureau proposes to discontinue official relations status with CI-ROLAC.

Annex C

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

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

1. AIDIS and PAHO over the past year have continued their joint efforts on issues related to water and sanitation, including:
 - a) joint collaboration during the XXX Central American Congress of Sanitary and Environmental Engineering and meetings of the AIDIS Panama chapter (PANAIDIS), both held in Panama City, Panama, in September 2017, with PAHO presenting the keynote address on “The Water Security Framework”;
 - b) joint participation in the II DIAGUA Congress and the I DIARE Congress that were held in Panama City, Panama;
 - c) joint sessions during the X Paraguayan Congress of Sanitary and Environmental Engineering and IX Congress of the IV Region of AIDIS in Asunción, Paraguay, in September 2017;
 - d) participation at the 29th Pan American Sanitary Conference of PAHO in Washington, D.C., in September 2017;
 - e) joint organization of keynote speeches during the Mexican Association of Engineering, Science and Environmental Management’s (AMICA) III Congress and the AIDIS XII Regional Congress for North America and the Caribbean held in Tabasco, Mexico, in October 2017;
 - f) organization of a webinar, “Challenges and Actions to Improve Air Quality in Mexico,” by the AIDIS Solid Waste Division (DIRSA) and the PAHO/WHO Representative Office in Mexico, as part of activities for Inter-American Air Quality Day: “Breathe Life”;
 - g) joint organization of workshops and special meetings with the PAHO Emergency Response Team in Bogotá, Colombia, in October 2017; and
 - h) collaboration in the preparation of Phase II of the Evaluation Protocol for Water, Sanitation, and Hygiene in Health Care Facilities, in Paraguay in November 2017.

Latin American Association of Pharmaceutical Industries (ALIFAR)

2. ALIFAR participated in the virtual meetings of the Steering Committee of the Pan American Network for Drug Regulatory Harmonization (PANDRH) in July 2017. This included interactions related to WHO’s informal consultation on the “Guidelines on Procedures and Data Requirements for Changes to Approved Biotherapeutic Products.” ALIFAR was present at the 29th Pan American Sanitary Conference and the
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161st Session of the Executive Committee of PAHO, both held in September 2017. Representatives of ALIFAR were present at the WHO Global Conference on Noncommunicable Diseases in Montevideo, Uruguay, in October 2017. ALIFAR collaborated with PAHO in the development of the Virtual Course on Health Regulation of Biological and Biotechnological Products.

American Public Health Association (APHA)

3. During 2017, APHA and PAHO undertook collaborative efforts to share information resources and facilitate participation at several key events, including National Public Health Week, World Health Day, Wellness Week, the 29th Pan American Sanitary Conference, and APHA's Annual Meeting. Additionally, both organizations have continued to support the ongoing development of the Alliance of Public Health Associations of the Americas (APHAA), also known as *Alianza de Asociaciones de Salud Pública de las Américas* (AASPA). Under an existing agreement for Spanish translation of the "Control of Communicable Diseases Manual," PAHO and APHA finalized an addendum for and translated a new chapter on Zika virus. Additionally, the translation of selected articles co-produced by the American Journal of Public Health and the Pan American Journal of Public Health continues expanding its readership and having an impact on public health efforts.

4. At the recent APHA 145th Annual Meeting in Atlanta, United States, in November 2017, PAHO organized two scientific sessions under the conference theme, "Creating the Healthiest Nation: Climate Changes Health." The session, "Pan American Action on Climate Change and Health," presented an overview of the challenges and priorities defined by PAHO Member States while sharing some of the promising practices and policies that are currently being applied in the Region. A second session, on climate change and its possible effects on arbovirus transmission in the Americas, explained how PAHO is using data to analyze the possible drivers of these diseases and map high-risk areas within the Region for potential outbreaks. PAHO screened three films as part of APHA's Global Public Health Film Festival, also held during the conference. The films dealt with public awareness of global antibiotic resistance; the elimination of trachoma in Mexico; and how Sesame Street and PAHO collaborated to create Zika public service messages for families in the Americas. A photo exhibit on universal health coverage was co-sponsored by APHA and PAHO. The images showcased how health is central to people's lives and focused on the steps countries need to take to reach the goal of "health for all."

American Society for Microbiology (ASM)

5. In the context of ASM's current work plan with PAHO (2017-2020), a number of activities are being planned and developed. Collaboration efforts are aimed at strengthening professional development, engagement, and knowledge sharing in Latin America and the Caribbean. Among the achievements in 2017 were:

- a) implementation of the ASM Art of Science Communication Workshop and ASM Scientific Writing and Publishing Workshop in Brazil, Colombia, El Salvador, Guatemala, Mexico, Paraguay, Uruguay, and Venezuela (Spanish subtitles have been added to the Art of Science Communication Workshop by the ASM Young Ambassador to Paraguay);
- b) enhanced network of ASM Young Ambassadors to facilitate in-country activities and engage early career scientists, with new appointments in Argentina, Brazil, Canada, Chile, El Salvador, Mexico, Panama, and Paraguay;
- c) online live-streaming of the Vector Borne Diseases Symposium during the XI Paraguayan Infectious Diseases Meeting to classrooms in Argentina and Panama, reaching an audience of over 400;
- d) free ASM membership and access to all online ASM journals provided to five members in Cuba, 57 members in Haiti, and 117 members in Venezuela through the Global Outreach Program, engaging scientists from resource-constrained and politically isolated countries; and
- e) initial assessment of the feasibility of a limited surveillance study of the presence of carbapenem-resistant Enterobacteriaceae in a convenience sample of patients whose stool is sent for other studies in El Salvador, Panama, and Paraguay.

Inter-American College of Radiology (CIR)

6. No information was available at the time this document was prepared.

Pan American Federation of Nursing Professionals (FEPPEN)

7. Over the last year, FEPPEN/PAHO collaboration has included topics related to nurse professional education, such as standardization of nurse grades in countries, curricular requirements, curricular design, teaching of nurses by competency, certification of nurses by competency, and internal and external migration of nurses. PAHO and FEPPEN have jointly undertaken political advocacy actions to help shape nurse educational curriculums across the Region to support professional development for nurses, as well coordinated knowledge-sharing actions to enable professional development. The joint report, “The Situation of Nursing Education in Latin America and the Caribbean towards Universal Health,” was published in 2017.

Panamerican Federation of Associations of Medical Schools (PAFAMS)

8. No information was available at the time this document was prepared.

Latin American Federation of Hospitals (FLH)

9. No information was available at the time this document was prepared.

Mundo Sano Foundation

10. Under the joint triennial work plan of Mundo Sano and PAHO, Mundo Sano has:
- a) organized the XVIII International Symposium on Neglected Diseases, where five PAHO officials participated, in Buenos Aires, Argentina, in October 2017;
 - b) attended the 29th Pan American Sanitary Conference in Washington, D.C., in September 2017;
 - c) participated in the meeting organized by PAHO on the development of pilot projects for the use of multiplex technology in Latin American countries, held in Mexico City, Mexico, in July 2017;
 - d) attended the XXIII Meeting of the Intergovernmental Commission of the Subregional Southern Cone Initiative for the Elimination of *T. infestans* and the Interruption of Transfusional Transmission of American Trypanosomiasis, held in Montevideo, Uruguay, in September 2017;
 - e) participated in the XVI Intergovernmental Meeting of the Initiative of Central America for Control of Vector-Borne and Transfusional Transmission and Medical Care for Chagas Disease, held in Panama City, Panama, in August 2017;
 - f) participated in the XII Meeting of the Intergovernmental Commission of the Andean Initiative for the Control of Vector-Borne and Transfusional Transmission and Medical Care for Chagas Disease, held in Bogotá, Colombia, in July 2017, for congenital Chagas treatment; and
 - g) undertaken preparation of a work proposal for the approach to congenital Chagas to support the implementation of the PAHO EMTCT Plus initiative.

Healthy Caribbean Coalition (HCC)

11. Over the last year, and in line with the collaborative work plan jointly agreed between the HCC and PAHO, the two organizations have been working together to support the design and implementation of an advocacy campaign to promote policies in two key areas: *a)* sugar-sweetened beverages taxation and school-based policies, with a focus on banning the sale of these beverages; and *b)* marketing and promotion of unhealthy foods in schools. HCC has developed partnerships with Bloomberg Philanthropies/Global Health Advocacy Incubator and with Vital Strategies to support the campaign design and implementation components of related PAHO projects. In 2017, HCC and PAHO jointly published an article, “Cancer Prevention and Control in the Caribbean,” in the journal “Cancer Control.” Finally, on 17 November 2017, HCC held the “Second Annual Caribbean Alcohol Reduction Day: Drink Less, Reduce Cancer,” with the support of PAHO, the Caribbean Public Health Agency (CARPHA), and the Caribbean Community (CARICOM).

Latin American and Caribbean Women's Health Network (LACWHN)

12. Over the past year, LACWHN, in collaboration with PAHO, has undertaken the following actions, among others, as part of the joint collaborative work plan:

- a) strengthening its regional network by holding the Regional Assembly in which more than 21 countries of the network were represented;
- b) developing strategic alliances with high-impact initiatives such as the *Campaña por la Convención*, *Campaña 28 de Septiembre*, *Sombrilla Centroamericana*, *Red Mundial por los Derechos Sexuales y Derechos Reproductivos*, and the Global Strategy for Women's, Children's and Adolescent's Health 2016-2030, among others;
- c) developing strategic communication actions through social networks and cyber-activism campaigns to accompany the actions of mobilization and advocacy at all levels;
- d) strengthening the capacity for political dialogue of social movement organizations, with decision makers, governments, and the international community; and
- e) systemically monitoring the commitments made by the States in favor of sexual rights and reproductive rights from a comprehensive and human rights approach, especially through the follow-up initiative "*Mira que te Miro*" of the Montevideo Consensus on Population and Development. Currently LACWHN is implementing the project "*Derechos aquí y ahora/Rights Here, Right Now*" in 10 countries (Bolivia, Curaçao, the Dominican Republic, Guyana, Haiti, Honduras, Jamaica, Saint Lucia, Suriname, and Trinidad and Tobago) with 47 organizations, and the project "*Sanando cuerpos y haciendo incidencia*" in six countries (Bolivia, the Dominican Republic, Ecuador, El Salvador, Haiti, and Paraguay), with 12 organizations that are part of the membership of LACWHN. Through these actions, LACWHN is working to strengthen the movement for women's health, and through this, health and human rights are promoted and enforced.

March of Dimes

13. The following actions were undertaken in 2017:

- a) March of Dimes, with the support of the US Centers for Disease Control and Prevention and in collaboration with PAHO and the WHO South-East Asia Regional Office (SEARO), organized the 8th International Conference on Birth Defects and Disabilities in the Developing World, held in Bogotá, Colombia, in November 2017. A total of 316 participants from 32 countries registered, and close to 80% of the participants were from the Latin American countries. PAHO experts were invited to present during a plenary meeting on the current situation of perinatal infection in Latin America. A message from PAHO was placed in the

- program book, and a keynote speech by PAHO was the main feature of the closing ceremonies.
- b) March of Dimes provided input and comments on the manual “Perinatal Infections Transmitted by the Mother to Her Infant: Educational Material for Health Personnel,” updated by PAHO and the Latin American Center for Perinatology, Women and Reproductive Health (CLAP/WR).

Inter-American Society of Cardiology (SIAC)

14. Over the last year, SIAC and PAHO, as part of their collaborative work plan, collaborated on the Regional Seminar on the Implementation of the Cardiovascular Risk Reduction Project in the Americas, organized by PAHO in Santiago, Chile, in May 2017. During the XXVI Inter-American Congress of Cardiology held in Panama City, Panama, in September 2017, SIAC and PAHO jointly presented a session entitled “Prevention: The Way to Fight Cardiovascular Diseases.”

United States Pharmacopeia (USP)

15. In 2017, PAHO and USP collaborated to provide technical assistance for strengthening regional capabilities to ensure the quality of medicines and other health technologies. USP offered technical support and joined PAHO’s mission to Kingston, Jamaica, in April 2017 to help conduct an evaluation of CARPHA’s Drug Testing Laboratory in order to support implementation of the Caribbean Regulatory System (CRS). In October 2017, USP provided technical support and training at the PAHO/WHO Representative Office in Belize to Ministry of Health officials on the use of the Global Pharma Health Fund-Minilab for assessing the quality of medicines. PAHO and USP continued to collaborate in offering technical assistance and guidance with pharmacopeial standards, including, as necessary, provision of complimentary copies of the Spanish and/or English editions of the USP-National Formulary (NF) compendia to national regulatory authorities and official medicines control laboratories in Latin America and the Caribbean in an effort to support their regulatory and compendial activities.

World Association for Sexual Health (WAS)

16. During 2017, WAS and PAHO jointly organized a symposium titled “Why a Wall between Sexual Health and Reproductive Health?,” held as part of the 23rd Congress of the World Association for Sexual Health in Prague, Czech Republic, in May 2017. This session provided an opportunity to discuss reproductive health and its connections to sexual health, which are meaningful for almost all population sectors, irrespective of age, gender, and other specificities.

Annex D**SCHEDULE OF SPBA REVIEWS OF NON-STATE ACTORS IN OFFICIAL
RELATIONS WITH PAHO**

(as of 1 January 2018)

Name	Date Admitted	Last Reviewed	Scheduled to be Reviewed
American College of Healthcare Executives (ACHE)/ <i>Colegio Estadounidense de Ejecutivos de Atención de Salud</i>	2014	-	2018
American Public Health Association (APHA)/ <i>Asociación Estadounidense de Salud Pública</i>	2013	2017	2020
American Society for Microbiology (ASM)/ <i>Sociedad Estadounidense de Microbiología</i>	2001	2017	2020
American Speech-Language-Hearing Association (ASHA)/ <i>Asociación Americana del Habla, Lenguaje y Audición</i>	2014	-	2018
Consumers International, Regional Office for Latin America and the Caribbean (CI-ROLAC)/ <i>Consumers International, Oficina Regional para América Latina y el Caribe</i>	2014	-	2018
World Resources Institute Ross Center for Sustainable Cities/ <i>Centro de Ciudades Sustentable del Instituto de Recursos Mundiales</i>	2010	2014	2018
Healthy Caribbean Coalition (HCC)/ <i>Coalición Caribe Saludable</i>	2012	2016	2019

Name	Date Admitted	Last Reviewed	Scheduled to be Reviewed
Framework Convention Alliance (FCA)/ <i>Alianza para el Convenio Marco</i>	2015	-	2018
Inter-American Association of Sanitary and Environmental Engineering/ <i>Asociación Interamericana de Ingeniería Sanitaria y Ambiental (AIDIS)</i>	1995	2017	2020
Inter-American College of Radiology/ <i>Colegio Interamericano de Radiología (CIR)</i>	1988	2016	2019
Inter-American Society of Cardiology/ <i>Sociedad Interamericana de Cardiología (SIAC)</i>	2012	2016	2019
Latin American Association of Pharmaceutical Industries/ <i>Asociación Latinoamericana de Industrias Farmacéuticas (ALIFAR)</i>	2000	2016	2019
Latin American Confederation of Clinical Biochemistry/ <i>Confederación Latinoamericana de Bioquímica Clínica (COLABIOCLI)</i>	1988	2014	2018
Latin American Federation of Hospitals/ <i>Federación Latinoamericana de Hospitales (FLH)</i>	1979	2016	2019
Latin American Society of Nephrology and Hypertension/ <i>Sociedad Latinoamericana de Nefrología e Hipertensión (SLANH)</i>	2015	-	2018

Name	Date Admitted	Last Reviewed	Scheduled to be Reviewed
Mundo Sano Foundation/ <i>Fundación Mundo Sano</i>	2016	-	2019
National Alliance for Hispanic Health (NAHH)/ <i>Alianza Nacional para la Salud de los Hispánicos</i>	1996	2014	2018
Panamerican Federation of Associations of Medical Schools (PAFAMS)/ <i>Federación Panamericana de Asociaciones de Facultades y Escuelas de Medicina (FEPAFEM)</i>	1965	2016	2019
Pan American Federation of Nursing Professionals/ <i>Federación Panamericana de Profesionales de Enfermería (FEPPEN)</i>	1988	2016	2019
InterAmerican Heart Foundation (IAHF)/ <i>Fundación InterAmericana del Corazón (FIC)</i>	2002	2015	2018
Latin American and Caribbean Women's Health Network (LACWHN)/ <i>Red de Salud de las Mujeres Latinoamericanas y del Caribe (RSMLAC)</i>	2004	2016	2019
Latin American Federation of the Pharmaceutical Industry/ <i>Federación Latinoamericana de la Industria Farmacéutica (FIFARMA)</i>	1979	2013	2018¹
March of Dimes	2001	2017	2020

¹ Renewal of status process was deferred from 2017 to 2018 by decision of the 160th Session of the Executive Committee.

Name	Date Admitted	Last Reviewed	Scheduled to be Reviewed
Sabin Vaccine Institute/ <i>Instituto de Vacunas Sabin</i>	2011	2015	2018
United States Pharmacopeia (USP)/ <i>Convención de la Farmacopea de Estados Unidos</i>	1997	2017	2020
World Association for Sexual Health (WAS)/ <i>Asociación Mundial para la Salud Sexual</i>	2001	2017	2020

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