



164th SESSION OF THE EXECUTIVE COMMITTEE

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Provisional Agenda Item 3.4

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NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

Report of the Subcommittee on Program, Budget, and Administration

Introduction

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

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 for at least two years which is assessed by both parties as being mutually beneficial. Official relations are based on a three-year plan for collaboration with PAHO that has been developed and agreed upon jointly by the non-State actor (NSA) and PAHO. The three-year plan is structured in accordance with the PAHO Strategic Plan and is consistent with FENSA. The plan shall be free from concerns that are primarily of a commercial or for-profit nature.

Application of NSAs for Admittance into Official Relations with PAHO

3. There are no new applications from non-State actors to be considered by the Executive Committee this year.

Review of the NSAs in Official Relations with PAHO

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

5. Currently, there are 27 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 year. This year 12 entities are up for renewal: the American College of Healthcare Executives; the Healthy Caribbean Coalition; the Inter-American College of Radiology; the Inter-American Society of Cardiology; the Latin American and Caribbean Women's Health Network; the Latin American Association of Pharmaceutical Industries; the Latin American Confederation of Clinical Biochemistry; the Latin American Federation of Hospitals; Mundo Sano Foundation; the Pan American Federation of Associations of Medical Schools; the Pan American Federation of Nursing Professionals; and the World Resources Institute Ross Center for Sustainable Cities. The Director submitted a report to the 13th Session of the Subcommittee on these 12 entities. An updated report that includes recommendations from Members of the Subcommittee is provided in Annex A.

6. The information submitted by the NSAs in support of their applications for continuing their official relations was made available to the Subcommittee in background documents, which contained a profile of the NSAs in official relations with PAHO and a report on their collaborative activities with PAHO.

7. The Subcommittee recommends that official relations with the following seven NSAs be maintained through 2021: the Healthy Caribbean Coalition; the Inter-American Society of Cardiology; the Latin American and Caribbean Women's Health Network; the Latin American Association of Pharmaceutical Industries; the Latin American Confederation of Clinical Biochemistry; Mundo Sano Foundation; and the World Resources Institute Ross Center for Sustainable Cities.

8. The Subcommittee recommends that the Executive Committee defer the decision on maintaining official relations with the Pan American Federation of Associations of Medical Schools, and the Pan American Federation of Nursing Professionals until 2020 in order to allow time to elaborate a more robust plan of collaboration without compromising existing work.

9. The Subcommittee recommends that the Executive Committee discontinue official relations with the American College of Healthcare Executives; the Inter-American College of Radiology; and the Latin American Federation of Hospitals due to a lack of collaboration over the past three years.

10. A table showing when each NSA in official relations with PAHO is scheduled for review by the Subcommittee is provided in Annex B.

Action by the Executive Committee

11. After reviewing the information provided, the Executive Committee is invited to consider adopting the proposed resolution presented in Annex C.

Annexes

Annex A

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

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

Healthy Caribbean Coalition

2. The Healthy Caribbean Coalition (HCC) is a registered not-for-profit organization formed in 2008 with over 100 civil society organizations (CSOs) as members. HCC works closely with regional and international partners to leverage the power of civil society in a whole-of-society response to the prevention and control of noncommunicable diseases (NCDs). HCC works in collaboration with government, private enterprise, academia, and international partners in the development and implementation of plans for the prevention and management of chronic diseases among Caribbean people.

3. Over the past three years, HCC has made important contributions to the implementation in the Caribbean of the Strategy and Plan of Action for the Prevention and Control of Noncommunicable Diseases, including through multisectoral policies and partnerships. The following activities were carried out under the work plan for collaboration between HCC and PAHO:

- a) HCC participated in the PAHO Salt Smart Consortium, whose activities include product reformulation, education, and advocacy.
- b) HCC and its members conducted cervical cancer education and screening for CSOs working with marginalized or hard-to-reach women in the Caribbean.
- c) HCC worked to enhance capacity of CSOs across all NCD disease categories to advocate for and implement policies and programs aimed at reducing childhood obesity.
- d) HCC's First Annual Caribbean Alcohol Reduction Day (18 November 2016) featured activities to raise awareness about the harmful effects of alcohol misuse. HCC efforts to promote comprehensive alcohol policies also included an alcohol policy brief, an alcohol policy situational analysis, and a national alcohol policy.

4. The following activities are proposed for the next three years (2019-2021) under the HCC/PAHO collaborative work plan:

- a) Continued support to strengthen the CARICOM National NCD Commissions through networking, capacity building, and informal technical assistance.
 - b) Continued capacity building to enable CSOs to deliver high-quality cervical cancer education, screening, and referrals targeting women in hard-to-reach communities
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- who would otherwise not access screening.
- c) Continued support to enable CSOs to advocate for establishment or scaling up of national human papillomavirus (HPV) vaccination programs.
 - d) Continued implementation of the HCC Civil Society Action Plan 2017-2021: Preventing Childhood Obesity in the Caribbean, in collaboration with regional and national partners.
 - e) Continued work on alcohol reduction. HCC, in partnership with PAHO, the Caribbean Public Health Agency (CARPHA), and other key stakeholders will continue to host the Annual Caribbean Alcohol Reduction Day to build public and policymaker awareness of the harmful effects of alcohol use.

Inter-American Society of Cardiology

5. The Inter-American Society of Cardiology (IASC) is made up of the national cardiology societies of most of the countries of the Americas, with the Spanish Society of Cardiology as an extracontinental member. IASC brings together these cardiovascular societies to promote research, education, and prevention of cardiovascular disease (CVD).

6. Over the past three years, the following activities were carried out under the work plan for collaboration between IASC and PAHO:

- a) Raising public awareness of the importance of cardiovascular disease prevention and control:
 - Launch of the “For the Heart of America” campaign to mobilize the population around prevention measures.
 - Sharing and promotion of regional experiences, including the WHO Global Hearts Initiative (HEARTS Initiative), at conferences held in the Region (2016 World Congress of Cardiology & Cardiovascular Health in Mexico; XXVI Inter-American Congress of Cardiology in Panama in 2017; First Inter-American Congress of Cardiac Failure in Panama in 2018).
- b) Capacity building through online courses:
 - Online course on secondary prevention of cardiovascular disease for first-level health care teams, facilitated by a group of IASC experts.

7. For the next three years (2019-2021), the following activities are proposed in accordance with the IASC/PAHO collaborative work plan:

- a) Expansion of the HEARTS Initiative in the Americas, which will require continued efforts to build sustainable technical capacity and advocate for expansion of the HEARTS approach.

- b) Work jointly toward the 25 x 25 target (a 25% reduction in premature mortality from NCDs by the year 2025) through the following activities:
- Prevention and treatment of rheumatic fever/rheumatic heart disease (RF/RCD).
 - An IASC/World Heart Federation initiative to tackle the problem of Chagas disease.
 - Continued efforts to promote priorities for cardiovascular health in all possible technical scenarios, as has been done since 2012.
 - Joint efforts to continue expanding online courses on management of hypertension and secondary prevention in countries where there has been little uptake of these courses.
 - A PAHO/IASC joint session within the framework of the XXVII Inter-American Congress of Cardiology in the Dominican Republic.

Latin American and Caribbean Women's Health Network

8. The Latin American and Caribbean Women's Health Network (LACWHN) is a regional-level feminist organization. LACWHN coordinates people and organizations involved in social movements and women's health to promote, support, and defend the right to universal access to comprehensive health care, the full exercise of human rights, especially sexual and reproductive rights, and women's participation as citizens, from feminist and intercultural perspectives. LACWHN seeks, above all, to strengthen the capacity for political coordination of Latin American and Caribbean feminism.

9. Over the past three years, the following activities were carried out under the work plan for collaboration between LACWHN and PAHO:

- a) Support for implementation of the WHO Global Strategy for Women's, Children's, and Adolescents' Health 2016-2030 and participation in consultation processes in the three subregions (South America, Central America, and the Caribbean). National organizations and PAHO have shared information to harmonize and adapt their programs to the situations experienced by women living in the countries of the Region.
- b) Dissemination of information, statistics, and evidence produced by PAHO.
- c) Coordinated participation in forums for public deliberation.
- d) Joint celebration of International Women's Day and International Day of Action for Women's Health.
- e) Participation in studies and activities aimed at uncovering and analyzing gender-based inequalities in the Region, including participation in the PAHO Commission on Equity and Health Inequalities in the Americas.

10. The following activities are proposed for the next three years (2019-2021) under the LACWHN/PAHO collaborative work plan:

- a) Continued support for implementation of the Global Strategy for Women's, Children's, and Adolescents' Health 2016-2030, disseminating it through LACWHN's communications channels to increase the number of organizations that are familiar with the strategy and that monitor it.
- b) Joint celebration of International Women's Day and International Day of Action for Women's Health, supporting the provision of relevant information, data, and statistics, along with technical tools for national-level organizations to disseminate this information.
- c) Monitoring implementation of the health- and gender-related objectives of the 2030 Agenda for Sustainable Development.

Latin American Association of Pharmaceutical Industries

11. The Latin American Association of Pharmaceutical Industries (ALIFAR, for its acronym in Spanish) is a nonprofit international body that brings together national pharmaceutical industry associations in the countries of Latin America. Its priority objectives are to support and strengthen national industry and promote and defend mutual interests at the subregional, regional, and international levels.

12. Over the past three years, the following activities were carried out under the work plan for collaboration between ALIFAR and PAHO:

- a) Participation in activities included in the projects of the Pan American Network for Drug Regulatory Harmonization (PANDRH); participation in meetings of the PANDRH Steering Committee and in preparatory work for the PANDRH Conference.
- b) Promoting knowledge, interpretation, and implementation of international and national guidelines on good practices in manufacturing and quality control, bioavailability and bioequivalence, regulations on biological/biotechnological drugs, and related subjects, through workshops, seminars, and meetings with regional health-related institutions. These activities included:
 - Technical training through workshops on the regulation of biologicals in the Americas.
 - A virtual course on the regulation of biological and biotechnological drugs, offered by PAHO to the national regulatory authorities of 18 countries through the Virtual Campus for Public Health.
 - Dissemination of information on drug registration, good manufacturing practices, bioequivalence, intellectual property, drug marketing, negotiation of free trade agreements, and other issues of interest to the sector.

13. The collaborative activities planned for the next three years (2019-2021) are aligned with recent joint efforts by ALIFAR and PAHO:

- a) Technical and scientific support for regional and global consultations on issues of the quality, safety, and efficacy of drugs, including biologicals.
- b) Participation in activities included in PANDRH projects, including participation in the meetings of the PANDRH Steering Committee and in preparatory work for the next PANDRH Conference.
- c) Promoting knowledge and application of international and national guidelines on good practices in manufacturing and quality control, bioavailability and bioequivalence, regulations on biological/biotechnological drugs, and related subjects, through participation in workshops, meetings, and seminars.

Latin American Confederation of Clinical Biochemistry

14. The Latin American Confederation of Clinical Biochemistry (COLABIOCLI, for its acronym in Spanish) was officially constituted on 28 November 1973 under the initiative of 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 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.

15. Over the past three years, the following activities were carried out under the work plan for collaboration between COLABIOCLI and PAHO:

- a) Training program to strengthen professional competencies, with emphasis on managerial training and quality management, including:
 - Course on quality management and good laboratory practices (third edition), with a necessary review and updating of its contents. Two distance learning courses were also launched, with the participation of a large number of students.
 - Preparation of a survey to assess the current situation of programs for external quality assessment and creatinine standardization in Latin American countries.
 - Preparation, editing, and online launch of a course on quality management and good laboratory practices for tuberculosis.
- b) Evaluation of quality management processes at the National Public Health Center (CNSP) of the National Health Institute of Peru.

- c) Survey on bioethics, carried out with COLABIOCLI affiliates, to understand the situation of bioethics in Latin America.
- d) Survey to assess the degree of interrelation among clinical laboratories in Latin America with respect to point-of-care testing (POCT). The survey sought to find out what type of POCT is used in clinical laboratories, as well as the tasks associated with control of POCT.
- e) Course for professionals affiliated with some of the member associations of COLABIOCLI and the Latin American Society of Inborn Errors of Metabolism and Neonatal Screening (SLEIMPN). The objective was to ensure that newborns and children under 1 year of age begin a healthy life through early detection of noncommunicable diseases that can lead to developmental delays or sudden death.
- f) Survey to assess the situation of clinical laboratories in the Region.
- g) Efforts to strengthen external quality assessment (EQA) programs in Latin America. This has provided an up-to-date vision of how EQA is approached in the countries and the state of development of methods, reagents, and technology in clinical laboratories in Latin America.

16. The following activities are proposed for the next three years (2019-2021) under the COLABIOCLI/PAHO collaborative work plan:

- a) Collaboration in training to strengthen professional competencies, with emphasis on managerial training and quality management. A series of courses and trainings will be held, including on-site and online courses, technical assistance, workshops, and virtual training, including:
 - Virtual training on quality management and good laboratory practices for university professors.
 - Adaptation of the course on quality management and good laboratory practices to meet the requirements of PAHO surveillance programs.
 - Workshop for university professors specialized in quality management and good laboratory practices.
 - Support for replicating the on-site course on quality management and good laboratory practices for tuberculosis.
 - Professional certification and recertification.
- b) Survey aimed at finding out more about the laboratories in the Region.
- c) Efforts to strengthen EQA programs in Latin America.
- d) Technical assistance in quality management, targeting national reference laboratories.

Mundo Sano Foundation

17. Mundo Sano Foundation is an organization whose objective is to stimulate research, encourage technological innovation, and promote education for health to improve people's quality of life and general welfare, working in areas related to medical, agricultural, veterinary, biological, physical, chemical, and natural sciences. Its main lines of work include developing new programs for interventions aimed at tackling various neglected infectious diseases such as Chagas, soil-transmitted helminth infections, leishmaniasis, hydatidosis, and mosquito-borne diseases such as dengue, chikungunya, and Zika.

18. Over the past three years, the following activities were carried out under the work plan for collaboration between the Mundo Sano Foundation and PAHO:

- a) Participation in regional technical cooperation for the prevention, control, and treatment of Chagas disease:
 - Collaboration with PAHO on subregional intergovernmental initiatives on Chagas disease.
 - Dissemination of information and participation in technical and scientific activities.
 - Participation and cooperation with PAHO projects in hyperendemic areas.
- b) Participation in regional technical cooperation for the prevention, control, and management of other neglected infectious diseases:
 - Participation and cooperation in PAHO's EMTCT Plus initiative (Framework for elimination of mother-to-child transmission of HIV, syphilis, hepatitis B, and Chagas).

19. The following activities are proposed for the next three years (2019-2021) under the Mundo Sano/PAHO collaborative work plan:

- a) For the prevention, control, and treatment of Chagas disease:
 - Preparation of modules of teaching material for the diagnosis, clinical management, and treatment of congenital and pediatric Chagas disease, acute Chagas disease, chronic Chagas disease, and Chagas disease associated with other pathologies and immunosuppression, aimed at health workers at all levels of care.
 - National workshops in Argentina, Bolivia, and Paraguay for the preparation of strategic lines to address the situation of Chagas disease in each country.
 - Prevention and control of Chagas disease in the South American Chaco region (Argentina, Bolivia, and Paraguay).

- b) For the prevention, control, and treatment of other neglected infectious diseases:
- Implementation of actions related to the EMTCT Plus strategy in Argentina and Paraguay.
 - Epidemiological surveillance and production of strategic information.

World Resources Institute Ross Center for Sustainable Cities

20. World Resources Institute (WRI) is an international research organization with more than 550 experts and staff working closely with leaders at the nexus of environment, economic opportunity, and human well-being. WRI envisions an equitable and prosperous planet driven by the wise management of natural resources. WRI aspires to create a world where the actions of government, business, and communities combine to eliminate poverty and sustain the natural environment for all people. Its main fields of work are climate, energy, food, water, forests, cities, business, economics, finance, and governance, and its activities focus on research and technical cooperation.

21. Over the past three years, activities were carried out under the WRI/PAHO collaborative work plan through the WRI Ross Center for Sustainable Cities. These entailed joint efforts to meet the targets of certain PAHO Strategic Plan outcome indicators by working to reduce risk factors associated with violence and injuries; reduce the prevalence of insufficient physical activity; and develop, strengthen, and/or implement national strategies on road safety. This included:

- a) Issuing publications and documents aiming at reducing risk factors associated with violence and injuries. The Cities Safer by Design guidebook contributed to raising awareness of why and how to create safer built environments by disseminating safe-street design principles. The SuM4ALL (Sustainable Mobility for All) document and indicators issued in 2017 emphasize the health benefits of public transportation. A global group of stakeholders was established to improve transport as a means to meet the Sustainable Development Goals (SDGs), particularly the goals on health and road safety.
- b) Participating in workshops to build capacity on road safety in the Region, including the following three workshops: Public Health and Road Safety; Global Action Plan on Physical Activity; and Sustainable Development Goals. WRI gave feedback on the draft WHO Global Action Plan on Physical Activity and added language to the plan linking road safety, planning, street design, and physical health. These activities helped build knowledge about the SDG targets for road safety in Goal 3 and Goal 11 and what they mean for the Region.

22. The following activities are planned for the next three years as part of the WRI/PAHO collaborative work plan for 2019-2021:

- a) Promotion of biking during Wellness Week through material that raises awareness of how to improve the accessibility and safety of biking in Latin American cities.
- b) Capacity-building activities, including a public webinar aimed at Latin America audiences, to improve national strategies and policies on road safety.
- c) Work with PAHO and municipal officials to improve understanding and awareness of the “safe system” approach in cities like Santo Domingo, Dominican Republic, and São Paulo and Fortaleza, Brazil. This approach includes measures to enable and advance environments that increase physical activity.

23. The Subcommittee recommends deferral of a decision on the following two non-State actors:

Pan American Federation of Associations of Medical Schools

24. The Pan American Federation of Associations of Medical Schools (PAFAMS) is a nonprofit academic organization that works in conjunction with national associations of medical schools throughout the hemisphere. Since the creation of PAFAMS in 1962 in Viña del Mar, Chile, the Federation has pursued its mission to improve the quality of medical education through its affiliated members, among other programs.

25. PAFAMS was not able to provide the required documentation in time for the writing of this report. The Subcommittee does not wish to compromise the existing collaboration, and thus proposes deferring the review of PAFAMS for one year.

Pan American Federation of Nursing Professionals

26. The Pan American Federation of Nursing Professionals (FEPPEN) represents the interests of its member organizations and promotes the development and strengthening of nursing in the Region. It provides significant support, information, and education on nursing services as well as initiatives for human resources development.

27. FEPPEN was not able to provide the required documentation in time for the writing of this report. The Subcommittee does not wish to compromise the existing collaboration, and thus proposes deferring the review of FEPPEN for one year.

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

(as of 1 January 2019)

Name (English)	Name (Spanish)	Date Admitted	Last Reviewed	Scheduled to be Reviewed
Action on Smoking and Health (ASH)	Action on Smoking and Health	2018		2021
American College of Healthcare Executives (ACHE)	Colegio Estadounidense de Ejecutivos de Atención de Salud	2014	--	2019*
American Public Health Association (APHA)	Asociación Estadounidense de Salud Pública	2013	2017	2020
American Society for Microbiology (ASM)	Sociedad Estadounidense de Microbiología	2001	2017	2020
American Speech-Language-Hearing Association (ASHA)	Asociación Americana del Habla, Lenguaje y Audición	2014	2018	2021
Drugs for Neglected Diseases Initiative - Latin America (DNDi)	Iniciativa Medicamentos para Enfermedades Olvidadas – América Latina	2018		2021
Framework Convention Alliance (FCA)	Alianza para el Convenio Marco	2015	2018	2021
Healthy Caribbean Coalition (HCC)	Coalición Caribe Saludable	2012	2016	2019
Inter-American Association of Sanitary and Environmental Engineering	Asociación Interamericana de Ingeniería Sanitaria y Ambiental (AIDIS)	1995	2017	2020
Inter-American College of Radiology	Colegio Interamericano de Radiología (CIR)	1988	2016	2019
Inter-American Society of Cardiology (IASC)	Sociedad Interamericana de Cardiología (SIAC)	2012	2016	2019
InterAmerican Heart Foundation (IAHF)	Fundación InterAmericana del Corazón (FIC)	2002	2018	2021
Latin American and Caribbean Women's Health Network (LACWHN)	Red de Salud de las Mujeres Latinoamericanas y del Caribe (RSMLAC)	2004	2016	2019

* Renewal of status process was deferred from 2018 to 2019 by decision of the 162nd Session of the Executive Committee.

Name (English)	Name (Spanish)	Date Admitted	Last Reviewed	Scheduled to be Reviewed
Latin American Association of Pharmaceutical Industries	Asociación Latinoamericana de Industrias Farmacéuticas (ALIFAR)	2000	2016	2019
Latin American Confederation of Clinical Biochemistry	Confederación Latinoamericana de Bioquímica Clínica (COLABIOCLI)	1988	2014	2019*
Latin American Federation of Hospitals	Federación Latinoamericana de Hospitales (FLH)	1979	2016	2019
Latin American Federation of the Pharmaceutical Industry	Federación Latinoamericana de la Industria Farmacéutica (FIFARMA)	1979	2018	2021
Latin American Society of Nephrology and Hypertension	Sociedad Latinoamericana de Nefrología e Hipertensión (SLANH)	2015	2018	2021
March of Dimes	March of Dimes	2001	2017	2020
Mundo Sano Foundation	Fundación Mundo Sano	2016	--	2019
National Alliance for Hispanic Health (NAHH)	Alianza Nacional para la Salud de los Hispanos	1996	2018	2021
Panamerican Federation of Associations of Medical Schools (PAFAMS)	Federación Panamericana de Asociaciones de Facultades y Escuelas de Medicina (FEPAFEM)	1965	2016	2019
Pan American Federation of Nursing Professionals	Federación Panamericana de Profesionales de Enfermería (FEPPEN)	1988	2016	2019
Sabin Vaccine Institute	Instituto de Vacunas Sabin	2011	2018	2021
United States Pharmacopeia (USP)	Convención de la Farmacopea de Estados Unidos	1997	2017	2020
World Association for Sexual Health (WAS)	Asociación Mundial de Salud Sexual	2001	2017	2020
World Resources Institute Ross Center for Sustainable Cities	Centro Ross del Instituto de Recursos Mundiales para las Ciudades Sustentables	2010	2014	2019*

* Renewal of status process was deferred from 2018 to 2019 by decision of the 162nd Session of the Executive Committee.

164th SESSION OF THE EXECUTIVE COMMITTEE

Washington, D.C., USA, 24-28 June 2019

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Annex C
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PROPOSED RESOLUTION

NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

THE 164th SESSION OF THE EXECUTIVE COMMITTEE,

(PP1) Having considered the report of the Subcommittee on Program, Budget, and Administration *Non-State Actors in Official Relations with PAHO* (Document CE164/7);

(PP2) Mindful of the provisions of the Framework of Engagement with Non-State Actors, adopted by the 55th Directing Council through Resolution CD55.R3 (2016), which governs official relations status between the Pan American Health Organization (PAHO) and such entities,

RESOLVES:

(OP)1. To renew official relations between PAHO and the following seven non-State actors for a period of three years:

- a) Healthy Caribbean Coalition;
 - b) Inter-American Society of Cardiology;
 - c) Latin American and Caribbean Women's Health Network;
 - d) Latin American Association of Pharmaceutical Industries;
 - e) Latin American Confederation of Clinical Biochemistry;
 - f) Mundo Sano Foundation;
 - g) World Resources Institute Ross Center for Sustainable Cities.
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(OP)2. To defer review of the following two non-State actors to permit time to finalize new plans of collaboration without compromising existing engagement:

- a) Pan American Federation of Associations of Medical Schools;
- b) Pan American Federation of Nursing Professionals.

(OP)3. To discontinue official relations with the following three non-State actors, in light of the lack of collaboration over the past three years:

- a) American College of Healthcare Executives;
- b) Inter-American College of Radiology;
- c) Latin American Federation of Hospitals.

(OP)4. To request the Director to:

- a) advise the respective non-State actors of the decisions taken by the Executive Committee;
- b) continue developing dynamic working relations with inter-American non-State actors of interest to the Organization in areas that fall within the program priorities that the Governing Bodies have adopted for PAHO;
- c) continue fostering relationships between Member States and non-State actors working in the field of health.

Report on the Financial and Administrative Implications of the Proposed Resolution for PASB

1. **Agenda item:** 3.4 – Non-State Actors in Official Relations with PAHO

2. **Linkage to [PAHO Program and Budget 2018-2019](#):**

This resolution proposes continuing official relations with seven Non-State Actors (NSAs), whose collaborative relationship was reviewed. It further proposes to defer the decision on maintaining official relations with the Pan American Federation of Associations of Medical Schools (PAFAMS); and the Pan American Federation of Nursing Professionals (FEPPEN, Spanish acronym) until 2020 and to discontinue official relations with American College of Healthcare Executives (ACHE); Inter-American College of Radiology (CIR, Spanish acronym); and the Latin American Federation of Hospitals (FLH, Spanish acronym). All collaborative work plans should be linked to one of the categories or program areas of the PAHO Strategic Plan.

Healthy Caribbean Coalition

- a) **Categories:** 2. Noncommunicable Diseases and Risk Factors
- b) **Program areas and outcomes:** 2.1: Noncommunicable Diseases and Risk Factors, OCM 2.1 Increased access to interventions to prevent and manage noncommunicable diseases and their risks factors. 2.5 Nutrition, OCM 2.5: Nutritional risk factors reduced

Inter-American Society of Cardiology

- a) **Categories:** 2. Non-Communicable Diseases and Risk Factors, 4. Health Systems
- b) **Program areas and outcomes:** 2.1 Noncommunicable diseases and risk factors; OCM 2.1 Increased access to interventions to prevent and manage noncommunicable diseases and their risk factors

Latin American and Caribbean Women's Health Network

- a) **Categories:** 3. Determinants of Health and Promoting Health Throughout the Life Course
- b) **Program areas and outcomes:** 3.3 Gender, Equity, Human Rights, and Ethnicity. OCM 3.3 Increased country capacity to integrate gender, equity, human rights, and ethnicity in health

Latin American Association of Pharmaceutical Industries

- a) **Categories:** 4. Health Systems

- b) Program areas and outcomes:** 4.3 Access to Medical Products and Strengthening of Regulatory Capacity, OCM 4.3 Improved access to and rational use of safe, effective, and quality medicines, medical products, and health technologies

Latin American Confederation of Clinical Biochemistry

- a) Categories:** 5. Health Emergencies
b) Program areas and outcomes: 5.1 Infectious Hazard Management, OCM 5.1 Countries' capacities strengthened to build resilience and adequate preparedness to mount a rapid, predictable, and effective response to major epidemics and pandemics

Mundo Sano Foundation

- a) Categories:** 1. Communicable Diseases
b) Program areas and outcomes: 1.4 Neglected, tropical, and zoonotic diseases, OCM 1.4 Increased country capacity to develop and implement comprehensive plans, programs, or strategies for the surveillance, prevention, control and/or elimination of neglected, tropical, and zoonotic diseases

World Resources Institute Ross Center for Sustainable Cities

- a) Categories:** 2. Noncommunicable Diseases
b) Program areas and outcomes: 2.3 Violence and injuries, OCM 2.3 Reduced risk factors associated with violence and injuries with a focus on road safety, child injuries, and violence against children, women, and youth

3. Financial implications:

Healthy Caribbean Coalition; Inter-American Society of Cardiology; Latin American and Caribbean Women's Health Network; Latin American Association of Pharmaceutical Industries; Latin American Confederation of Clinical Biochemistry; Mundo Sano Foundation; World Resources Institute Ross Center for Sustainable Cities.

- a) Total estimated cost for implementation over the lifecycle of the resolution (including staff and activities): None
 b) Estimated cost for the 2018-2019 biennium (including staff and activities): None
 c) Of the estimated cost noted in b), what can be subsumed under existing programmed activities? Not available

4. Administrative implications:

Healthy Caribbean Coalition; Inter-American Society of Cardiology; Latin American and Caribbean Women's Health Network; Latin American Association of Pharmaceutical Industries; Latin American Confederation of Clinical Biochemistry; Mundo Sano Foundation; World Resources Institute Ross Center for Sustainable Cities.

- a) Indicate the levels of the Organization at which the work will be undertaken: Regional, sub-regional, and country level
 b) Additional staffing requirements (indicate additional required staff full-time equivalents, noting necessary skills profile): None
 c) Time frames (indicate broad time frames for the implementation and evaluation): Three years

Analytical Form to Link Agenda Item with Organizational Mandates

1. **Agenda item:** 3.4 Non-State Actors in Official Relations with PAHO
2. **Responsible unit:** Department External Relations, Partnerships and Resource Mobilization (ERP)
3. **Preparing officer:** Regina Campa, Partnerships Advisor (ERP) in collaboration with the following technical focal points:
 - a) Healthy Caribbean Coalition: Silvana Luciani, NMH
 - b) Inter-American Society of Cardiology: Pedro Orduñez, NMH
 - c) Latin American and Caribbean Women's Health Network: Catharina Cuellar, EGC
 - d) Latin American Association of Pharmaceutical Industries: Analia Porras, HSS
 - e) Latin American Confederation of Clinical Biochemistry: Jean-Marc Gabastou, PHE/IHM
 - f) Mundo Sano Foundation: Luis Gerardo Castellanos, CDE
 - g) World Resources Institute Ross Center for Sustainable Cities: Eugenia Rodriguez, NMH
4. **Link between Agenda item and Sustainable Health Agenda for the Americas 2018-2030:**

Healthy Caribbean Coalition

Goal 9: Reduce morbidity, disabilities, and mortality from noncommunicable diseases, injuries, violence, and mental health disorders.

Target: 9.1 Reduce premature mortality from noncommunicable diseases by one-third through prevention and treatment and promote mental health and well-being (SDG target 3.4);

Target 9.7 Contribute to ending all forms of malnutrition, including achieving by 2025 the internationally agreed targets on stunting and wasting in children under 5 years of age, and addressing the nutritional needs of adolescent girls, pregnant and lactating women, and older persons (adapted from SDG target 2.2).

Inter-American Society of Cardiology

Goal 9: Reduce morbidity, disabilities and mortality from noncommunicable diseases, injuries, violence and mental health disorders.

Target 9.1: Reduce premature mortality from noncommunicable diseases⁷⁸ by one-third through prevention and treatment and promote mental health and well-being (SDG target 3.4).

Latin American and Caribbean Women's Health Network

Goal 11: Reduce inequality and inequity in health through intersectoral, multisectoral, regional, and sub regional approaches to the social and environmental determinants of health.

Target 11.1: Demonstrate a marked reduction health inequity gaps as measured by any of the following equity stratifiers: place of residence (rural/urban), race, ethnicity, occupation, gender, sex, age, education, and socioeconomic status using simple inequality measures (absolute and relative gap) (WHO Handbook on Health Inequality Monitoring)

Goal 1: Expand equitable access to comprehensive, integrated, quality, people-, family- and community-centered health services, with an emphasis on health promotion and illness prevention.

Target 1.1.: Reduce by at least 50% the regional mortality amenable to health care rate (MAHR) (updated from PAHO Strategic Plan impact goal 4.1);

Target 1.4 Ensure universal access to sexual and reproductive health care services, including for family planning, information, and education, and the integration of reproductive health into national strategies and programs. (SDG target 3.7).

Latin American Association of Pharmaceutical Industries

Goal 5: Medicines, Vaccines and Technologies.

Target 5.5: Implement the requirements of the international Basic Safety Standards in diagnostic and therapeutic services that use radiation health technologies (Radiation Protection and Safety of Radiation Sources: International Basic Safety Standards, PAHO document CSP28/17, Rev. 1 [2012]).

Latin American Confederation of Clinical Biochemistry

Goal 1: Equitable Access to Health Services

Target 1.6: Organize health services into integrated health service delivery networks with high resolution capacity at the first level of care (updated PAHO Strategic Plan outcome 4.2).

Goal 3: Human Resources for Health.

Target 3.3: Strengthen the quality of professional health education in collaboration with the education sector, through evaluation systems and the accreditation of training institutions and degree programs (adaptation of the PAHO Strategy on Human Resources for Universal Access to Health, CE160/18 [2017]).

Mundo Sano Foundation

Goal 10. Reduce the burden of communicable diseases and eliminate neglected diseases.

Target 10.7: Eliminate neglected infectious diseases as public health problems (adapted from the PAHO Plan of Action for the Elimination of Neglected Infectious Diseases and Post-Elimination Actions 2016-2022, document CD55/15 [2016]).

World Resources Institute Ross Center for Sustainable Cities

Goal 9: Reduce morbidity, disabilities and mortality from non-communicable diseases, injuries, violence, and mental health disorders.

Target 9.5: Reduce by half the number of deaths and injuries caused by road traffic accidents (adapted from SDG target 3.6).

5. **Link between Agenda item and the [Strategic Plan of the Pan American Health Organization 2014-2019 \(Amended\)](#):**

Healthy Caribbean Coalition

- a) **Categories:** 2. Noncommunicable Diseases and Risk Factors.
- b) **Program areas and outcomes:** 2.1: Noncommunicable Diseases and Risk Factors; 2.5: Nutrition. OCM 2.1: Increased access to interventions to prevent and manage noncommunicable diseases and their risks factors; OCM 2.5: Nutritional risk factors reduced.

Inter-American Society of Cardiology

- a) **Categories:** 2. Non-Communicable and Health Factors, Program Area: Non-communicable Diseases and Risk Factors.
- b) **Program areas and outcomes:** 2.1. Non-communicable Diseases and Risk Factors. OCM 2.1. Increased access to interventions to prevent and manage noncommunicable diseases and their risks factors.

Latin American and Caribbean Women's Health Network

- a) **Categories:** 3. Determinants of Health and Promoting Health Throughout the Life Course.
- b) **Program areas and outcomes:** 3.3 Gender, Equity, Human Rights, and Ethnicity. OCM 3.3 Increased country capacity to integrate gender, equity, human rights, and ethnicity in health.

Latin American Association of Pharmaceutical Industries

- a) **Categories:** 4. Health Systems.
- b) **Program areas and outcomes:** 4.3 Access to Medical Products and Strengthening of Regulatory Capacity. OCM 4.3 Improved access to and rational use of safe, effective, and quality medicines, medical products, and health technologies.

Latin American Confederation of Clinical Biochemistry

- a) **Categories:** 5. Health Emergencies.
- b) **Program areas and outcomes:** 5.1 Infectious Hazard Management. OCM 5.1 Countries' capacities strengthened to build resilience and adequate preparedness to mount a rapid, predictable, and effective response to major epidemics and pandemics.

Mundo Sano Foundation

- a) **Categories:** 1. Communicable Diseases.
- b) **Program areas and outcomes:** 1.3 Malaria and Other Vector-borne Disease. OCM 1.3 Increased country capacity to develop and implement comprehensive plans, programs, or strategies for the surveillance, prevention, control, and/or elimination of malaria and other vector-borne diseases.

World Resources Institute Ross Center for Sustainable Cities

- a) **Categories:** 2. Non-communicable Diseases.

- b) Program areas and outcomes:** 2.3 Reduced risk factors associated with violence and injuries. OCM 2.3 Reduced risk factors associated with violence and injuries with a focus on road safety, child injuries, and violence against children, women, and youth.

6. List of collaborating centers and national institutions linked to this Agenda item:

Latin American Association of Pharmaceutical Industries

- Biologics and Generics Therapies Directorate by Health Canada CAN-94
- Center for Biologics Evaluation and Research (CBER)/ Food and Drug Administration (FDA) USA-289
- Ministries of Health from countries in the Region of the Americas
- National Medicines Regulatory Authorities

Latin American Confederation of Clinical Biochemistry

- Ministry of Health, Departments of Normalization and National Public Health Laboratory Services of Latin American member states
- WHO Office in Lyon, France
- CDC Atlanta, USA

Mundo Sano Foundation

- Iniciativa Subregional de Prevención, Control y Atención de Chagas del Cono Sur (INCOSUR/Chagas)
- Iniciativa Subregional Andina de Prevención, Control y Atención de Chagas (IPA)
- Iniciativa Subregional de Prevención, Control y Atención de Chagas de Centroamérica y México (IPCAM)
- Iniciativa Subregional Amazónica de Prevención, Control y Atención de Chagas (AMCHA)

World Resources Institute Ross Center for Sustainable Cities

- Johns Hopkins University
- Instituto Nacional de Salud Pública de México

7. Best practices in this area and examples from countries within the Region of the Americas:

Healthy Caribbean Coalition

HCC social marketing campaign to support the PAHO Salt Smart/HCC/USF social marketing initiative in St. Vincent, Antigua and Barbados.

Capacity building for civil society organizations to work in partnership with the public and private sector to provide high quality education, screening (pap smears/VIA), diagnosis, treatment, and referral for cervical cancer resulting in greater screening coverage and attainment of national screening targets. Increased advocacy for national HPV vaccination programs. Strengthened civil society contribution to cervical cancer advocacy and to the national cervical cancer response in targeted countries: Belize, Guyana, Haiti, Jamaica.

Capacity building for civil society across all NCD disease categories to advocate for and implement policies and programs aimed at reducing childhood obesity.

HCC promotion of comprehensive regional and national alcohol policies.

Inter-American Society of Cardiology

PAHO partnered with SIAC for the development and production of the virtual course titled Hypertension Management for Primary Care Teams. This course has been one of the most successful courses with over 50,000 enrolled health professionals and students during the first two years of the course been launched on the virtual campus. The country of Ecuador has had the highest number of enrollees in the course. In addition, SIAC members throughout the countries are promoting our HEARTS Initiative to reduce cardiovascular disease in the Americas.

Latin American and Caribbean Women's Health Network

Active participation in the sub regional dialogue on the Global Women, Children and Adolescents Strategy and the development of PAHO Plan of Action in this area.

Latin American Association of Pharmaceutical Industries

Nearly 70 professionals from National Regulatory Authorities for Medicines of 18 countries of the Americas completed the virtual course on "Sanitary Regulation of Biological and Biotechnological Products - Edition 2018" of the Virtual Campus of Public Health of the Pan American Health Organization (VCPH/PAHO).

The purpose of this virtual course is to develop competences for the evaluation of biological and biotechnological products by the National Regulatory Authorities (NRAs). It seeks to support the strengthening of regulatory functions for medicines in the Americas and to strengthen the collaboration between NRAs of the Region, through the exchange of information and experiences between countries.

The course program consisted of a self-learning phase, where participants completed ten modules aimed at covering the different aspects of the sanitary regulation of medicines of biological origin. At the end of this instance, students presented a final integrative project to support the development of an institutional development plan (IDP) of the NRA to which they belong.

The course was prepared with the collaboration of the following Regional Reference National Regulatory Authorities: ANMAT (Argentina), ANVISA (Brazil), Health Canada (Ministry of Health of Canada), INVIMA (Colombia), CECMED (Cuba), together with other collaborators: the National Commissioner of Bioethics in Mexico, and other members of the Board of Directors of the Pan American Network for Harmonization of Pharmaceutical Regulation (RedPARF), the Latin American Association of Pharmaceutical Industries (ALIFAR), and the Latin American Federation of the Pharmaceutical Industry (FIFARMA).

Latin American Confederation of Clinical Biochemistry

Instituto de Diagnostico y Referencia Epidemiologicos (InDRE) Mexico has been designated as WHO Collaborating Center in quality management systems in 2018. The scope of work of this center include training, academic education and good laboratory practices.

COLABIOCLI Latin America countries members have been encouraged to include quality management, biosafety and good laboratory practices in their national laboratory policies and national regulation for laboratory licensing.

Mundo Sano Foundation

Established a space of dialogue and coordination between Mundo Sano Foundation and the countries of the region, following PAHO's guidelines.

World Resources Institute Ross Center for Sustainable Cities

Established a global group of stakeholders to improve transport under SDGs, particularly on health and road safety.

8. Financial implications of this Agenda item:

The collaborative work plans of most of these NSAs in official relations with PAHO are financed by the approved budget of the relevant technical areas or by the NSA's budgets; there are no financial implications beyond the approved Biennial Work Plan in excess of US\$ 20,000.

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