

Chronic Disease Prevention & Control in the Americas



Monthly Newsletter of the PAHO/WHO Chronic Disease Program
Pan American Health Organization
Regional Office of the World Health Organization



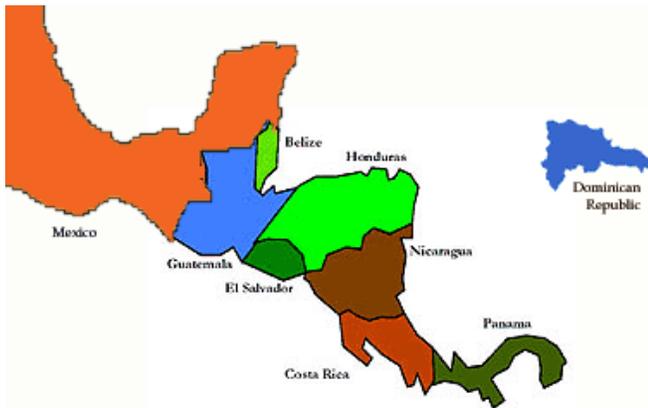
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Editor-in-Chief: James Hospedales; Associate Editors: Silvana Luciani, Enrique Pérez-Flores; Editorial Staff: Pilar Fano, Pedro Ordúñez, Suzanna Stephens; Copy Editor: Donna Eberwine

Spotlight: Progress in Central America & Dominican Republic



This issue highlights major advancements taking place in Central America and the Dominican Republic and recently launched communications vehicles that promote integration and exchange.



Chronic disease prevention and control and the implementation of the [Regional Strategy for the Prevention and Control of Chronic Disease](#) is supported by the Presidency *pro tempore* (PPT) of [COMISCA](#), the Council of Health Ministers of Central America (*Consejo de Ministros de Salud de Centroamérica*). COMISCA is showing strong leadership in dealing with the problem in this subregion. It has set up coordination mechanisms with the *Institute of Nutrition of Central America and Panama* ([INCAP](#)) to develop cooperation activities with the PAHO Chronic Disease Project. Within this framework, INCAP has shown interest in facilitating the multistakeholder Partners Forum in the subregion, as a tool to promote action against chronic disease by integrating other sectors in the fight against these diseases and their risk factors. In addition, INCAP is currently implementing a new project, the *INCAP Comprehensive Center for the Prevention of Chronic Diseases in Mesoamerica and*

the Dominican Republic ([CIIPEC](#)), with the goal of systematic capacity-building for government and academic institutions in Mesoamerica and the Dominican Republic.

Two important meetings were held at the end of March to advance the objectives of the Regional Strategy. The first was to form the Technical Commission for Chronic Disease and Cancer; and the second, to introduce the Partners Forum.

Technical Commission for Chronic Diseases & Cancer

PAHO and INCAP, together with the Executive Secretariat of COMISCA, co-facilitated a meeting with the Executive Secretariat of COMISCA to take a major concrete step forward in accordance

Contents

- Spotlight: Progress in Central America & Dominican Republic.. 1
 - Technical Committee, Chronic Diseases & Cancer..... 1
 - Partners Forum Concept Introduced in Panama.....2
 - Panama to Host Regional Meeting with PAHO & PATH for Cervical Cancer Managers..... 3
 - CIIPEC-INCAP's Comprehensive Center for Chronic Diseases in Mesoamerica & Dominican Republic 3
 - World Physical Activity Day..... 4
 - Physical Activity & Public Health Courses..... 4
 - Nutritional & Population Sciences Doctoral Program.....4
 - Workshop: Population Health & Nutrition Program Evaluation.....5
 - Workshop on Epidemiological Research.....5
 - Researchers Training Program.....5
 - CIIPEC Presents at New Delhi Meeting.....6
 - Chronic Diseases No Longer Diseases of the Rich..... 6
 - Myths and Facts about Chronic Disease..... 7
 - Support a UNGASS on CNCDs..... 9
 - New IOM Reports..... 10
 - PAHEF Calls for Nominations, New Award..... 10

with the resolutions made in the past two [RESSCAD](#) (*Reuniones del Sector Salud de Centro América y República Dominicana*, or Meetings of the Health Sector of Central America and the Dominican Republic, in their XIV and XV sessions): the formation of the [Technical Commission for Chronic Diseases and Cancer](#) (*Comisión Técnica de Enfermedades Crónicas y Cáncer/CTCC*), whose members include representatives of the subregion's ministries of public health and the social security institutes as well as INCAP. The formation of this commission meets one of the strategic objectives established for chronic diseases in the health plan for Central America and the Dominican Republic ([Plan de Salud de Centroamérica y República Dominicana](#)) adopted by RESSCAD. The regulation was approved under which the CTCC will operate, and work was begun on putting together the annual operations plan (*Plan operativo anual / POA*) that will guide its activities. PAHO's efforts were recognized and its future role in technical assistance outlined in the regulatory process.

The general objective of the CTCC is to contribute to the continuing improvements in the treatment of chronic diseases and cancer through the formulation of political, technical, and administrative proposals that promote regional integration as a mechanism to facilitate and empower national activities.



Partners Forum Concept Introduced in Panama PARTNERS FORUM FOR ACTION ON — CHRONIC DISEASE —

The purpose of this [meeting](#) was to introduce the Partners Forum concept to local stakeholders. Participants included major actors from the different sectors:

- ✓ *Health*: COMISCA
- ✓ *Agriculture*: Regional Agro-Environmental and Health Strategy (*Estrategia Regional Agroambiental y Salud / ERAS*)
- ✓ *Social welfare*: Social security institutes
- ✓ *Academia*: Central American University Council for Higher Education (*Consejo Superior Universitario de Centro América / CSUCA*)
- ✓ *Municipal*: Federation of Municipalities of the Central American Isthmus (*Federación de Municipalidades del Istmo Centroamericano / FEMICA*)
- ✓ *Civil society / consumers*: Guatemalan Consumers League (*Liga de consumidores de Guatemala*)
- ✓ *International organizations*: PAHO/WHO
- ✓ *Regional organizations*: INCAP
- ✓ *Food industry*: Alimentos S.A. and Tetrapack

The main issues to be dealt with were to:

- ✓ improve the understanding of the processes of multisectoral engagement and partnership,
- ✓ explore the initiative within the framework of COMISCA (Council of Ministers of Health of Central America / *Consejo de Ministros de Salud de Centroamérica*),
- ✓ provide guidance on preliminary structure, and
- ✓ clarify the overall message of the Partners Forum and its local implementation.

Those present at the meeting conducted a preliminary assessment and developed specific tools to facilitate management, brief participants, and agree on consistent communications. James Hospedales, Senior Advisor of the PAHO Chronic Disease Project, gave a presentation on the rationale for a multistakeholder approach, and participants gathered in a workshop to clarify the

opportunities, challenges, and risks of partnership as well as roles and leadership within the partnership. Then they defined common objectives and future activities.



In the end, COMISCA endorsed the process as an implementation of a new tool to deliver technical cooperation, and the Institute of Nutrition of Central America and Panama (*Instituto de Nutrición de Centro América y Panamá/INCAP*) joined the team of local partners. Participants shared their experiences and made suggestions for inter-forum activities and the concept of partnerships, with a view to consolidating plans for the future launch of the Partners Forum in Central America.

Panama to Host Regional Meeting with PAHO and PATH for Cervical Cancer Managers

New Technologies for Cervical Cancer Prevention: From Scientific Evidence to Program Planning

To advance the implementation of the [Regional Strategy and Plan of Action for Cervical Cancer Prevention and Control](#), PAHO—together with the

Ministry of Health of Peru and [PATH](#)—are convening a meeting of program managers and decision-makers from Latin America and the Caribbean. The objectives are to:

- ✓ Raise awareness of human papillomavirus (HPV) vaccines as well as new technologies for cervical cancer screening in order to stimulate planning their incorporation into public health programs in Latin American and Caribbean countries.
- ✓ Review current scientific evidence and discuss country experiences regarding new approaches and technologies for cervical cancer prevention, both primary and secondary.
- ✓ Plan collaborative activities that will strengthen national cervical cancer programs.



This will be an opportunity for multidisciplinary health professionals to deepen their knowledge of new scientific evidence regarding new screening tests and HPV vaccines, as well as to strengthen partnerships and alliances between public health program managers and other partners.



CERVICAL CANCER
PREVENTION IN LATIN AMERICA
AND THE CARIBBEAN

The outcomes of this regional meeting will be shared in next month's newsletter.

Centro Integral del INCAP para la Prevención de las Enfermedades Crónicas en Mesoamérica y República Dominicana




INCAP Comprehensive Center for the Prevention of Chronic Diseases in Mesoamerica and Dominican Republic

CIIPEC–INCAP's Comprehensive Center for the Prevention of Chronic Diseases in Mesoamerica & Dominican Republic

This issue spotlights activities recently undertaken by the INCAP Comprehensive Center for the

Prevention of Chronic Diseases in Mesoamerica and the Dominican Republic ([CIIPEC](#)), housed at

the Institute of Nutrition of Central America and Panama (*Instituto de Nutrición de Centro América y Panamá/INCAP*) in Guatemala City.

CIIEPEC is dedicated to systematic capacity-building for ministries of health and academic institutions, to expand actions aimed at preventing and controlling nutrition-related chronic diseases and their risk factors. The Center carries out independent research and provides training in the prevention and control of nutrition-related chronic diseases and maintains a collaborative network of health professionals and researchers in this area. It also evaluates countries' and institutions' capacities and needs in prevention and control of nutrition-related chronic diseases, including evaluations of policies, plans, programs and monitoring and surveillance. It helps build individual and institutional capacities in applied research, politics and program implementation for government and academic institutions in Mesoamerica and the Dominican Republic, including INCAP.

CIIEPEC's recently launched website is a major resource for health professionals, offering announcements and updates on courses and research, news and other useful information. We recommend that you add the CIIEPEC site to your "Favorites" to keep abreast of their many activities in the subregion. You can also subscribe to CIIEPEC's [E-Newsletter](#).

The articles on pages 2–5 (also featured on the CIIEPEC website) describe activities organized or promoted by CIIEPEC in collaboration with other partners in Mesoamerica and the Dominican Republic.

World Physical Activity Day

On Tuesday, 6 April, [World Physical Activity Day](#) was celebrated, organized in the Americas by the Brazilian program [Agita Mundo](#) (Shake the World). One of the purposes of this program is to promote physical activity and health through the creation of physical activity networks, publishing innovations on the subject, and by sharing good practices and efficient strategies and programs. For this occasion, CIIEPEC is working on a mass media campaign encouraging 30 minutes of



physical activity every day. For more information, see www.agitamundo.org/.

Physical Activity and Public Health Courses



The [Physical Activity and Public Health Courses](#) (PAPH), sponsored by the [University of South Carolina Prevention Research Center](#) and the Centers for Disease Control and Prevention ([CDC](#)), are entering their 16th year of successful training for researchers and public health practitioners.

- ➔ The 8-day Research Course serves post-doctoral personnel and is designed to develop research competencies related to physical activity and public health.
- ➔ The 6-day Practitioner's Course is for those professionally involved or interested in community-based initiatives to promote physical activity.

The faculty for the courses are nationally recognized experts in public health research and practice. Approximately 25 fellows are accepted for each course, based on educational background, experience, professional position, and potential to enhance public health research and practice.

The 2010 *Physical Activity and Public Health Courses* will be held 14–22 September 2010 in Park City, Utah, USA. For more information, see the [course website](#) or contact Janna Borden at (+1-803) 576-6050 or jsborden@mailbox.sc.edu.

Nutritional & Population Sciences Doctoral Program

[Call for Applications](#) from the National Institute of Public Health of Mexico



(INSP): Latin American countries find themselves at different stages of nutritional transition, but nearly all face nutritional excesses or deficiencies that play an important role as risk factors for mortality, incapacity and morbidity. Recognizing the need for well-qualified human resources in nutrition and the fact that there are few doctoral-level graduate programs in this field, the INSP's Nutrition and Health Research Center (*Centro de Investigaciones en Nutrición y Salud / CINyS*) has designed a [Population Nutritional Doctoral Studies](#)

Program that trains professionals to carry out strategic research on population nutrition, with a focus on working independently and using the highest ethical and technical standards. Students will learn to design and evaluate nutritional interventions and programs, analyze nutritional policies and programs, and develop practical, evidence-based strategies to address the unequal and changing health and nutrition situation in Mexico and Latin America.

In a South-South collaboration scheme with CIIPEC, the INSP is offering two scholarships to qualified Central American candidates. The application deadline is 31 May. The program will start September 6.

Workshop on Population, Health, and Nutritional Program Evaluation



INSP Course endorsed by CIIPEC, 5–23 July 2010

Governments invest large sums of money and a huge amount of resources to implement programs aimed at improving the health and nutritional conditions of the population. The expectation is that a better-informed population with more and better health services will adopt healthy behaviors that ultimately improve their general health conditions.

In a context of limited public resources, it is important to evaluate health programs to determine whether they have lived up to the expected effectiveness. Evidence produced through rigorous evaluation allows decision-makers and program managers to implement changes to improve programs or, if need be, to discontinue them. Evaluations require rigorous analytical methods to determine if the programs have had or are having a positive effect on the target population, and to provide an adequate estimate of the magnitude of that effect.

This course will enable participants to develop the necessary skills to carry out impact assessments of population, health and nutrition programs. It will teach both the theoretical and practical bases of program theory and the most appropriate state-of-the-art quantitative techniques. For more information, see the [INSP website](#).

Epidemiological Research Course

This CIIPEC course offers an introduction to the most up-to-date methods being used for epidemiological research. It will consist of theoretical presentations with illustrations and examples from current literature, working group sessions, and presentations by participants. Participants will learn the proper steps to follow when planning an epidemiological study; distinguish different types of epidemiological design, with knowledge of their advantages and limitations; articulate their research goals; and put forth the general methodology to follow in an epidemiological study.

Date: 24–27 May 2010

Place: [Hotel Riande Continental](#), Panama

Cost: US\$ 120 (includes meals and materials)

Researchers' Training Program

On 13–16 March 2010, a CIIPEC workshop on [Protection of Human Subjects Involved in Research](#) was held at INCAP headquarters in Guatemala City. The event resulted in the creation of an online training course on research with human subjects and best practices in how to prepare informed consent forms and letters to ethics committees.

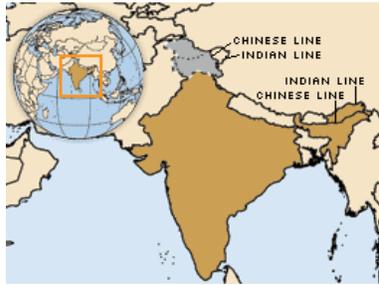


This event was attended by 21 participants from the Cardiovascular Surgery Unit of Guatemala (UNICAR); the Aldo Castañeda Foundation; INCAP; and universities in Costa Rica, Honduras, Nicaragua, El Salvador, Mexico, and Guatemala. [Agenda](#)

The Researchers Training Program will hold its next workshop in Panama City on 24–27 May 2010. Watch the [CIIPEC website](#) for details!

CIIPEC Presents at New Delhi Meeting

The [Oxford Health Alliance Summit](#) took place in New Delhi, India, on 19–20 April, followed by the Meeting of [the Global Health Initiative Steering Committee for Chronic Diseases](#)



[Prevention](#) on 21–22 April. Representatives of the 10 Centers for Excellence around the world participated. [Agenda](#) | [CIIPEC coverage](#)

Dr. Manuel Ramirez presented the results of the study on *Current Capabilities and Needs to Face Chronic Diseases*. This study was conducted by INCAP and PAHO during 2007 and 2009 in the eight countries of Central America as well as the Dominican Republic. Findings will be summarized in the second issue of the CIIPEC [E-Newsletter](#).



A new financing opportunity was recently announced by the National Heart Lung and Blood Institute ([NHLBI](#)), US National Institutes of Health ([NIH](#)), to support collaborative research projects between two or more Centers of Excellence. This financing opportunity has two call dates (September 2010 and March 2011), for a maximum amount of \$500,000. NHLBI representatives recommend that all centers participate with new collaborative proposals.

Chronic Diseases No Longer Diseases of the Rich

UN says noncommunicable diseases must be tackled as development issue in poor states.

Chronic noncommunicable diseases (CNCDs) such as cardiovascular and chronic respiratory illnesses, diabetes, and cancer are imposing a much



greater burden on the poorest countries than on richer economies and must be tackled as a development issue, United Nations health experts warned at a news briefing in New York on 13 April.

“It’s not like we have to wait for these countries to develop their economy, then start to suffer from noncommunicable diseases,” said UN World Health Organization (WHO) Coordinator of Health Promotion Gauden Galea. “We are talking about countries and populations that are already dying at much higher rates and much earlier than people do in the richer economies.”

The Director of the Population Division in the UN Department of Economic and Social Affairs (DESA), Hania Zlotnik, noted the irony that the increasing prevalence of noncommunicable diseases in developing countries was partly the result of success in combating communicable diseases.



The consequent ageing of the population means that “people do not die early in life, they die much later in life and it is more likely that then they will die of a noncommunicable disease,” she said. Dr. Galea noted that four chronic diseases—cardiovascular, diabetes, cancer and chronic respiratory illness—are responsible for 60% of the world’s deaths, and 80% of these deaths are happening in the poorest populations of the world.

“As you look at the plot of mortality versus GDP you will see that already the poorest countries of the world suffer from higher burdens of noncommunicable diseases than the richer countries of the world,” he added. “We are making a point that noncommunicable diseases are an issue of development ...

“There should not be global development initiatives that continue to ignore noncommunicable diseases as if they do not exist in countries of sub-Saharan Africa and populations who are poor,” he said, stressing that governments have to recognize the social determinants and behavioral issues, such as smoking, unhealthy diets, alcohol and lack of physical activity, as people urbanize.

Governments must address these risks and provide the services that people are being denied because of the neglect of noncommunicable diseases, he concluded.



In February, WHO Director-General Margaret Chan told more than 100 key stakeholders at the first *Global Forum of the Non-communicable Disease Network (NCDnet)* in Geneva that many developing countries have reached the point where affluent countries were some decades ago.

“Diseases once associated with abundance are now heavily concentrated in poor and disadvantaged groups. Developing countries have the greatest vulnerability and the least resilience,” she said.

Noncommunicable diseases currently account for 35 million deaths annually worldwide out of 58.7 million, the majority of them (28.1 million) in low- and middle-income countries. In developing countries alone, an estimated 8 million such deaths per year are premature—that is, before 60 years of age—and could potentially be prevented.



Source: **Non-communicable diseases must be tackled as development issue in poor states – UN.**

Myths & Facts about Chronic Disease

Health promotion activities and risk factor reduction can prevent the occurrence of and mortality from several chronic diseases.



Exploding the myths!

By December of this year, the Americas will have recorded the occurrence of 21 million deaths from chronic diseases since the start of the 21st century.

Throughout the world, hypertension, diabetes, stroke, heart disease, and cancers are already responsible for two-thirds of all deaths, with a huge impact on health systems and societies.

Some myths about chronic diseases distort society’s perception of their severity and thus delay the strengthening of comprehensive programs that include preventive measures and broaden access to early diagnosis and timely treatment.

Given the strength of available data and scientific evidence,



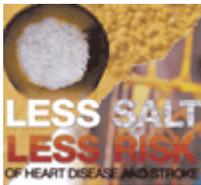
however, these myths, do not stand up to analysis, as will be shown below:

Myth: Chronic diseases kill people who already are very old; deaths from chronic diseases are the natural outcome of long life—especially in developing countries.

Fact: In Bolivia, almost 40% of the deaths from stroke occur in people under 65; and in Brazil, 28.7%. In Canada, this percentage is only 8.6%.



The high percentage of premature deaths suggests that people with hypertension lack access to diagnosis and treatment, and that there are problems with the quality of emergency care. These problems can be overcome by adopting adequate strategies.



Myth: We cannot prevent chronic diseases, since there are no vaccines against them.

Fact: On the contrary, activities to promote health and reduce risk factors and to increase coverage for early diagnosis can prevent several chronic diseases from occurring at all and hence reduce deaths from them.

For example, estimates show that combining regulatory measures with educational campaigns to reduce salt consumption, both at the table and in processed foods, could prevent **8.5 million avoidable deaths** worldwide over the next decade.

Long before the advent of human papillomavirus (HPV) vaccines, several countries had already drastically reduced mortality from cervical cancer by providing universal preventive exams and initial treatment. In the USA and Canada, this type of cancer is responsible for 2.5 deaths in every 100,000



women, while in South American countries, the rate is nearly five times higher.

The reduction in mortality from cardiovascular diseases (CVDs) that has been confirmed in recent decades in nearly all countries of the world is yet another example of the success of measures taken to prevent risk factors—for example, smoking—combined with improvements in medical care.



Myth: Chronic diseases are diseases of the rich. Developing countries and poor people need not concern themselves with them at this point.

Fact: Low- and middle-income countries account for 80% of all reported deaths from chronic disease, and the trend is growing.

It is not hard to explain why. The main risk factors for chronic diseases—smoking, obesity, not eating enough fruits and vegetables, living a sedentary lifestyle—all show a **growing trend among the poorest and least educated people.**

Data from Brazil’s recent National Household Survey (Pesquisa Nacional por Amostras de Domicílios / PNAD) reveal that, among people with less than one year of education, only 9.5% of them engage in sports or physical exercise, and 25.7% smoke.



In comparison, among people with 11 or more years of education, 37% are physically active only 11.9% of them smoke.

Early diagnosis is also less frequent among the poor, who have greater difficulties in obtaining access to health services.

The PNAD survey found that 25.3% of all women over 40 had never had a mammogram—a national average that conceals important inequalities.



Among women with an income five times higher than minimum

wage, 18.9% had never had this examination done. However, among those with income of less than a quarter of minimum wage, the percentage rises to 71.2%. This same pattern of iniquity holds for all preventive examinations for chronic diseases in the majority of the Latin American countries.

It is now a matter of urgency to break this vicious circle: people who are already poor are more likely to suffer from chronic disease and thus from reduced productivity and increased expenditure on medicines, which only causes them to fall even deeper into poverty.



Both the progress already made and current knowledge call for strengthening activities and adopting new, more effective strategies to respond to the enormous challenge of chronic diseases.

Dr. Jarbas Barbosa da Silva, Area Manager

Health Surveillance & Disease Prevention & Control, PAHO/WHO

For our Brazilian readers, a Portuguese version of this article was published online in the [Folha de São Paulo](#).

Support a UNGASS on CNCDs

The American Cancer Society needs your help in the fight against cancer! Please call on your government to support a United Nations General Assembly Special Session (UNGASS) on Noncommunicable Diseases.



Chronic noncommunicable diseases (CNCDs)—including cancer, heart disease, and diabetes—claim more than 35 million lives each year and account for approximately 60% of all deaths worldwide. Despite this great burden, chronic diseases are largely overlooked and underfunded. Preventing and controlling chronic noncommunicable diseases should be a global health priority.

The [American Cancer Society](#) is supporting a campaign sponsored by the [International Union Against Cancer](#), the [International Diabetes Federation](#) and the [World Heart Federation](#) to

address the burden of noncommunicable diseases. In the next few weeks, a resolution will be introduced at the United Nations calling for a United Nations General Assembly Special Session (UNGASS) on Noncommunicable Diseases. A UNGASS on chronic diseases would raise the profile of these diseases on the global stage, mobilize the international community to take action, and secure the commitment of heads of state to lead the cross-government effort necessary to reverse the epidemic. The HIV/AIDS UNGASS held in 2001 resulted in a Heads of State Declaration of Commitment that paved the way for the urgent international response that followed and helped stabilize the HIV/AIDS epidemic.

You can help by calling on your government to support this resolution. For your convenience, please find below a link to a copy of the letter template that can be adapted for use with your ministers and United Nations representatives. To have an influence on the upcoming vote, it is important that your letter be sent in the next week.

- ➔ [Letter Template](#)
- ➔ [List of United Nations Representatives](#)

In addition to the letter template, we have attached several background materials for your reference, including a briefing document, a letter drafted by the American Cancer Society, American Heart Association and the American Diabetes Association to the U.S. Ambassador to the United Nations, and a link to current representatives to the United Nations.

- ➔ [Background Information on CNCDs & UNGASS](#)
- ➔ [Joint Statement by ACS, AHA and ADA](#)

The Caribbean Community (CARICOM) has drafted a [resolution](#) to support the NCD UNGASS.

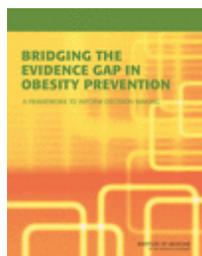
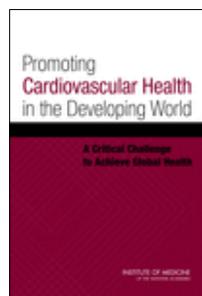
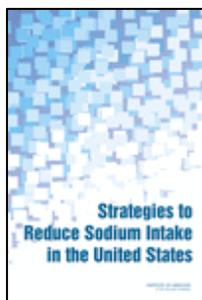
We ask you to join with us to take action on this important matter. Thank you for your support!

Source: Nathan Grey, MPH, National Vice President for Global Health, National Home Office of the American Cancer Society, Inc., 250 Williams Street, Atlanta, GA 30303, USA. Website: [cancer.org](#)

New IOM Reports

The United States Institute of Medicine (IOM) has issued three new reports pertaining to chronic disease:

- ✓ [Strategies to Reduce Sodium Intake in the United States](#)
 - [Report Brief](#)
 - [Press Release](#)
 - [Statement from American Heart Association](#)
- ✓ [Promoting Cardiovascular Health in the Developing World](#)
 - [Report Brief](#)
 - [Activity Description](#)
 - [Press Release](#)
- ✓ [Bridging the Evidence Gap in Obesity Prevention: A Framework to Inform Decision Making](#)
 - [Report Brief](#)
 - [Recommendations](#)



Awards with a nomination deadline of 15 June 2010, 5:00 PM:

- [Abraham Horwitz Award for Excellence in Leadership in Inter-American Health](#)
- [Pedro N. Acha Award for Excellence in Veterinary Public Health](#)
- [Fred L. Soper Award for Excellence in Health Literature](#)
- [Clarence H. Moore Award for Excellence for Voluntary Service](#)

Awards with a nomination deadline of 30 June 2010, 5:00 PM:

- [Manuel Velasco Suárez Award for Excellence in Bioethics](#)

Each awardee receives a cash prize or grant, certificate of merit, and a paid trip to Washington, DC, to receive the award at the annual PAHO/PAHEF Awards for Excellence in Inter-American Public Health. The awardee will also be recognized before the ministers of health of the region at the next PAHO Directing Council Meeting.

Past winners of the esteemed Awards for Excellence in Inter-American Public Health are some of the most renowned individuals and organizations working in the field of public health throughout the Western Hemisphere.

Notable past winners include:

- ✓ **Dr. Eduardo A. Pretell Zárate** (*Abraham Horwitz Award for Excellence in Leadership in Inter-American Health*), former minister of health of Peru. He was the founder of the National Iodine Deficiency Control Program in Peru and is regional coordinator for Latin America in the International Council for the Control of Iodine Deficiency Disorders.
- ✓ **Dr. Ricardo Uauy** (*Abraham Horwitz Award for Excellence in Leadership in Inter-American Health*), world-renowned nutritionist, pediatrician, and professor. He is currently a professor of public health nutrition at the London School of Hygiene and Tropical Medicine. He formerly worked at the Institute of Nutrition and Food Technology (INTA) at the University of Chile.
- ✓ **Mrs. Mary Pérez de Marranzini** (*Clarence H. Moore Award for Excellence for Voluntary Service*), director for more than 40 years of the Asociación

PAHEF Calls for Nominations, New Award

Call for Nominations Open Now for the 2010 Awards for Excellence in Inter-American Public Health



Nominations are being accepted online now at <http://www.pahef.org/awards/nominations> for the 2010 Awards for Excellence in Inter-American Public Health, a joint program of the Pan American Health and Education Foundation (PAHEF) and the Pan American Health Organization (PAHO). These awards honor dedicated professionals who led the way in advancing health conditions in the Americas during the last century; they are intended to stimulate the growth of the next and rising generation of leaders working to improve health and health care in the Americas.

Dominicana de Rehabilitación in the Dominican Republic.

- ✓ **Dr. Cesar Victora** (*Abraham Horwitz Award for Excellence in Leadership in Inter-American Health*), a leader in addressing the health problems of mothers and children, particularly infant nutrition and child growth, in Latin America and worldwide. He is currently a professor of epidemiology at the Federal University of Pelotas in Brazil.
- ✓ **Dr. Guilherme Luiz Guimaraes Borges** (*Fred L. Soper Award for Excellence in Health Literature*), for the paper, "Traumatic Events and Suicide-related Outcomes among Mexico City Adolescents."
- ✓ **Dr. Ilane Hernández Morales** (*Pedro N. Acha Award for Excellence in Veterinary Public Health*), for her thesis "Preparation and Assessment of a DNA Vaccine Versus Salmonella enterica Serovar Enteritidis Outer Membrane Protein A (OmpA) in Laying Hens."
- ✓ **Patricia Sorokin** (*Manuel Velasco Suárez Award for Excellence in Bioethics*), a researcher who is a graduate of Buenos Aires University, wrote a paper entitled, "Treatment of Personal Data on Genome Research: Bioethical, Legal, and Social Aspects."

A jury of distinguished public health professionals, leaders in their fields, reviews nominations from across the Americas from outstanding public health practitioners, organizations and institutes, and governments and recommends a candidate for each award to the board of trustees of the Foundation, who make the final award decision.

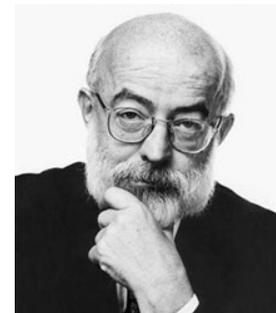
To learn more about the specific criteria for these awards, please visit www.pahef.org/awards.

New Arouca Award: Call Open

PAHEF and PAHO Announce Creation of the **Sérgio Arouca Award for Excellence in Universal Health Care**: Call for Nominations Now Open

The Pan American Health and Education Foundation (PAHEF) and Pan American Health Organization (PAHO) are proud to announce the creation of the

Sérgio Arouca Award for Excellence in Universal Health Care in honor of Dr. Sérgio Arouca, a Brazilian national, public health professional, and legislator (photo to the right).



This award recognizes one or more people, institutions, or governmental or nongovernmental organizations that have excelled in one or more of the following:

- a. Developing policy and a national strategy for comprehensive health care in the previous year;
- b. Promoting health programs and advances to increase the coverage, equity, and quality of care;
- c. Promoting and implementing effective management of health systems, developing policies for universal health care, promoting such legislation within the framework of the nation's health systems structure;
- d. Developing innovative programs that target groups of the socially excluded or geographically disadvantaged populations;
- e. Introducing innovatively designed programs for degree and non-degree training of health care workers focused on expanding universal health care;
- f. Demonstrating efficacy in efforts to involve communities in the planning, management, and appraisal of health programs; and
- g. Preparing and executing relevant research on primary health systems.

The awardee receives a cash prize, certificate of honor, and a paid trip to Washington, DC, to receive the award at the annual PAHO/PAHEF Awards for Excellence in Inter-American Public Health Event and is recognized before the ministers of health of the region at the PAHO Directing Council Meeting.

Nominations are being accepted 30 April through 30 June 2010, 5:00 PM EST, at www.pahef.org/arouca.

STOP THE GLOBAL EPIDEMIC OF CHRONIC DISEASE

PROMOTE. PREVENT. TREAT. CARE

Chronic Disease Prevention and Control in the Americas

To subscribe, please write a request to Pilar Fano (fanopili@paho.org). Readers are invited to submit their contributions of 1–3 paragraphs on activities related to chronic disease in the Americas by sending them to Dr. James Hospedales (hospedaj@paho.org) with copies to Suzanna Stephens (stephens@paho.org) and Pilar Fano (fanopili@paho.org). Letters to the Editor should be addressed to Silvana Luciani (lucianis@paho.org). Instructions and criteria can be found on the homepage for this newsletter at the web link below:

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