NON-SATE 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 CD55.3, 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 the constitutional legal framework of PAHO 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 which time it may decide on the desirability of maintaining official relations or defer the 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, 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 and operational procedures 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 appears to be subject to the influence of private sector entities to the extent that it should itself be considered a private sector entity, it will be invited to make the necessary adjustments to its policies, governance, or funding prior to its next triennial review.

6. Given the extraordinary and unprecedented circumstances presented by the COVID-19 pandemic, the 14th Session of the Subcommittee on Program, Budget, and Administration of the Executive Committee was cancelled. Thus, on the basis of the foregoing, the Executive Committee is invited to consider the applications for admission into official relations from three non-State actors and to review the collaboration with eight non-State actors in the context of their triennial review.¹

Applications of Non-State Actors for Admission 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 three non-State actors meet the requirements and are therefore presented for consideration by the Executive Committee: American Heart Association, Basic Health International, and Global Oncology.

8. Annex A provides information on the applications for admission into official relations with PAHO from these non-State actors.

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

9. Currently, there are 24 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, eight entities are up for renewal: American Public Health Association, American Society for Microbiology, Inter-American Association of Sanitary and Environmental

¹ Decisions on two of the eight were previously deferred by one year, in accordance with Resolution CE164.R11 (June 2019), and are therefore included in this review.
Engineering, March of Dimes, Pan American Federation of Associations of Medical Schools, Pan American Federation of Nursing Professionals, United States Pharmacopeial Convention, and World Association for Sexual Health.

10. As a result of its review, the Bureau recommends that the Executive Committee continue official relations with eight non-State actors: American Public Health Association, American Society for Microbiology, Inter-American Association of Sanitary and Environmental Engineering, March of Dimes, Pan American Federation of Associations of Medical Schools, Pan American Federation of Nursing Professionals, United States Pharmacopeial Convention, and World Association for Sexual Health.

11. Detailed supplementary background documents on each non-State actor mentioned above will be provided separately for consideration by the Executive Committee.

12. Annex B provides information on PAHO collaboration with the eight entities that are up 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. Annex D provides the schedule of reviews of all non-State actors in official relations with PAHO.

Action by the Executive Committee

13. The Executive Committee is invited to review the information in this report and consider adopting the proposed resolution presented in Annex E.

Annexes
Annex A

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

The Pan American Sanitary Bureau recommends admission into official relations with PAHO for the following three non-State actors:

American Heart Association

1. Established in 1924, the American Heart Association (AHA) strives to be a relentless force for a world of longer, healthier lives by fighting heart disease and stroke. AHA fulfills its mission by 
   a) supporting scientific discovery and the next generation of health care professionals and researchers; 
   b) disseminating scientific information; 
   c) developing evidence-based guidelines and statements; 
   d) creating and advocating for the implementation of performance indicators and measures; 
   e) developing clinical decision support and quality improvement tools; and 
   f) developing directed-cause campaigns.

2. Over the past two years, the following activities have been carried out jointly by AHA and PAHO:

   a) AHA has collaborated for several years with PAHO on salt reduction strategies. Capacity building has been provided to several Latin American and Caribbean countries on social marketing and behavior change communication concerning salt reduction and healthy eating.

   b) PAHO and AHA have worked on building country capacity for cardiovascular disease prevention and for support programs and actions to reduce dietary salt and sodium intake by using the best scientific evidence and knowledge translation.

   c) In 2019, collaborative efforts focused on promoting the implementation of comprehensive policies and interventions and on building capacity to use social marketing strategies to address unhealthy diets with the aim of preventing obesity and noncommunicable diseases.

   d) AHA supported the review of the HEARTS module and serves as a partner in its implementation.

3. The following activities are proposed for the next three years (2020-2022) under the work plan for collaboration between AHA and PAHO:

   a) Social marketing training initiative: Finalize the modules on social marketing and promote and launch them across the Region of the Americas to support country efforts to tackle salt reduction and related risk factors of noncommunicable diseases (NCDs).
b) Promotion of childhood health: AHA will share knowledge, best practices, and tools as part of regional efforts focused on childhood health and related risk factors, and build capacity and organize youth representatives to support public policy campaigns in the Region in priority areas.

Basic Health International

4. Basic Health International (BHI) is committed to eliminating cervical cancer globally by conducting cutting-edge research on early prevention and treatment, implementing sustainable strategies that can be scaled up in limited-resource settings, and leading advocacy for evidence-based strategies and policies.

5. Over the past two years, the following activities have been carried out jointly by BHI and PAHO:

a) Support to the Ministry of Health in El Salvador by providing cervical cancer prevention training for more than 400 physicians and nurses, including development and distribution of screening data collection forms and forms for visual inspection with acetic acid.

b) Provision of technical advice on incorporation of the human papillomavirus (HPV) test into cervical cancer prevention programs in Guatemala, Honduras, and Nicaragua.

c) Provision of inputs for development of the WHO/PAHO toolkit “Improving Data for Decision-making: A Toolkit for Cervical Cancer Prevention and Control Programmes,” and implementation of questionnaires and other materials from the WHO/PAHO toolkit in El Salvador as part of the Ministry of Health’s national cervical cancer program.

6. The following activities are proposed for the next three years (2020-2022) under the work plan for collaboration between BHI and PAHO:

a) In-country assessment of cervical cancer prevention programs: Joint mission teams will conduct comprehensive program assessments and assist with the development of cervical cancer prevention plans as part of the PAHO Plan of Action for Cervical Cancer Prevention and Control 2018-2030 (Document CD56/9).

b) Training of health care professionals to strengthen cervical cancer screening and treatment programs.

c) Clinical training of health care professionals in cervical precancer treatment.

d) Training for in-country pathologists that will review gross and histological pathology to support cervical cancer prevention programs.
**Global Oncology**

7. The mission of Global Oncology (GO) is to bring the best in cancer care to underserved patients around the world. GO collaborates across geographic, professional, and academic borders to build capacity of health systems, to educate patients, caregivers, and the general public, and to mobilize the global cancer community to stem the growing tide of cancer in low- and middle-income countries.

8. Over the past two years, the following activities have been carried out jointly by GO and PAHO:

   a) Trainings in clinical management of prostate cancer for oncology professionals in Guyana.
   b) Didactic and hands-on training of clinical staff in medical oncology in Belize.
   c) Provision of technical inputs in national cancer control planning meetings in Belize.

9. The following activities are proposed for the next three years (2020-2022) under the work plan for collaboration between GO and PAHO:

   a) Didactic and hands-on trainings in medical oncology for clinical staff in emerging and/or established public oncology programs in select countries in the Region.
   b) Design of clinical operations and patient navigation systems that allow for real-time tracking of patients throughout their cancer journeys.
   c) Development of tools and processes for improving prostate cancer care.
   d) Trainings in prostate cancer screening, detection, diagnosis, and treatment for clinical staff in emerging and/or established public oncology programs in select countries in the Region.
   e) Technical assistance to national cancer control planning efforts in select countries in the Region, and guidance on developing clinical operations and patient navigation systems to enhance diagnosis and treatment of cancer patients.
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 eight non-State actors:

American Public Health Association

1. The American Public Health Association (APHA), founded in 1872, is an organization for professionals in the field of public health and allied professions committed to improving the health of the public and achieving equity in health status. APHA seeks to advance the health of all people through prevention, reduction of health disparities, and promotion of wellness.

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

   a) APHA Annual Meetings: PAHO and APHA collaborated on activities to successfully raise awareness of public health issues within APHA Annual Meetings in 2017, 2018, and 2019. These activities included a) co-hosting, each year, two scientific sessions highlighting various public health issues faced in the Region; b) presentation of a PAHO exhibit at the Public Health Expo; and c) submission of films to the APHA Global Public Health Film Festival.

   b) Publications: under an existing project for translating material published in the American Journal of Public Health and the Pan American Journal of Public Health, APHA and PAHO explored opportunities to redesign the dual-language supplements with a focus on priority themes. Both organizations have also added addenda for the Spanish translations of the updated chapters in the Control of Communicable Diseases Manual.

   c) Ad hoc activities, including: a) engagement in the coordination and planning of activities related to National Public Health Week and World Health Day; b) support for development of the Alliance of Public Health Associations of the Americas (APHAA); and c) coordinated communications to share opportunities and resources through the networks of both organizations.

3. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between APHA and PAHO:

   a) APHA Annual Meetings: at every Annual Meeting, APHA and PAHO will work together to a) co-host two scientific sessions to inform participants about how PAHO works with its Member States to strengthen health systems and improve and
protect health in the Region; b) present a PAHO exhibit at the Public Health Expo to disseminate PAHO’s information and resources and widen its visibility; and c) participate in the Global Public Health Film Festival.

b) Publication partnerships/translation project: APHA’s American Journal of Public Health will continue to partner with PAHO’s Pan American Journal of Public Health to translate select articles for publication in the latter journal, published by PAHO on a periodic basis. Additionally, both organizations will continue to work together on the translation of the latest edition of the Control of Communicable Diseases Manual, with the addition of a chapter on Zika virus disease.

c) Joint work on key public health issues: PAHO and APHA will proactively identify opportunities for collaboration that can strengthen impact and advance toward mutual goals. Such activities may include, among others, training/webinars and engagement in events such as World Health Day.

**American Society for Microbiology**

4. The American Society for Microbiology (ASM), founded in 1899, brings together more than 47,000 scientists and health professionals. Its mission is to promote and advance the microbial sciences through conferences, publications, certifications, and educational opportunities. It also enhances laboratory capacity around the globe through training and resources. It provides a network linking scientists in academia, industry, and clinical settings. In addition, ASM promotes a deeper understanding of the microbial sciences for diverse audiences.

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

a) Sharing of microbiology training materials: ASM has produced expert-developed microbiology materials and resources. Training material is used to standardize how national laboratories in the Region of the Americas conduct antimicrobial resistance (AMR) surveillance. PAHO has utilized a portfolio of ASM materials for its training efforts with the Latin American Network for Antimicrobial Resistance Surveillance (ReLAVRA). In partnership with PAHO, ASM also developed the Manual de pruebas de susceptibilidad antimicrobiana, with a compact disc that contains multiple resources for the community.

b) Ambassadors of the American Society for Microbiology in the Region: ASM maintains a community of experienced and emerging microbiology leaders, known respectively as Country Ambassadors and Young Ambassadors. They have access to ASM resources and serve as local experts within their countries to advance microbiology-based solutions. These experts support PAHO programs when microbiology expertise is needed. Under the collaborative work plan, the network of Young Ambassadors of ASM was enhanced to facilitate in-country activities, such as the provision of technical assistance and training on AMR in the Region.
c) As part of the regular series of webinars hosted by PAHO that bring together the RelAVRA community, ASM was invited to present the resources and programs it has available. ASM presented its global public health strategy related to strengthening AMR laboratories in lower-resourced health care settings.

d) In February 2018, ASM representatives met with PAHO to discuss efforts around antimicrobial resistance. The ASM surveillance plan was presented for input on opportunities to leverage lessons learned in sub-Saharan Africa and Southeast Asia to guide an AMR strategy for countries in Latin America and the Caribbean.

e) ASM conducted a workshop at the Latin American Association for Microbiology (ALAM) meeting in Santiago, Chile, in November 2018.

f) 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 people.

g) Initial feasibility assessment of a limited surveillance study of the presence of carbapenem-resistant Enterobacteriaceae in a convenience sample of patients whose stool is sent to laboratories for other studies in El Salvador, Panama, and Paraguay.

6. The following activities are proposed for the next three years (2020-2022) under the ASM/PAHO collaborative work plan:

a) Strengthening of AMR surveillance in the Region via the One Health approach. ASM and PAHO will collaborate to enhance the capabilities of national laboratories in the Region to monitor and mitigate the spread of antimicrobial resistance.

b) Collaboration between ASM and PAHO to strengthen the community of microbiologists across the Region. This includes continued efforts to nurture this community through social media, direct involvement, and cross-invitations to both PAHO- and ASM-sponsored events, as well as direct invitation to ASM ambassadors to take part in ASM projects led by PAHO within the Region.

Inter-American Association of Sanitary and Environmental Engineering

7. The Inter-American Association of Sanitary and Environmental Engineering (AIDIS) is a technical and scientific organization that brings together the principal institutions of professionals and students dedicated to environmental preservation, health, and sanitation in the Region of the Americas. Its mission is to promote public health and the quality of life of the peoples of the Americas, and to protect and preserve the environment, through coordinated actions in sanitary engineering and the environmental sciences, as well as other disciplines concerned with human development.
8. Over the past three years, the following activities were carried out under the work plan for collaboration between AIDIS and PAHO:

a) Preparation of water safety guidelines and plans:
   - Guidelines for the management of urban solid waste and plans to ensure a safe drinking water supply in Mexico, including the Guide to Water Safety Planning in Small Municipalities.
   - Basic Strategy for Management of Municipal Solid Waste, which provides municipalities with a work schedule geared to producing short-term results.
   - Review and validation of the manuals and guides by the relevant authorities.

b) Training of emergency and disaster response teams on topics related to water and sanitation.

c) Application of the Evaluation Protocol for Water, Sanitation, and Hygiene in Health Care Facilities, developed by the PAHO/WHO Regional Water and Sanitation Technical Team (ETRAS) and AIDIS, in Bolivia, Guatemala, Honduras, Panama, and Paraguay. This included evaluating key indicators and verifying the conditions in hospitals to provide a picture of water and sanitation conditions in the health facilities of those countries.

d) Support for holding a PAHO symposium on water and sanitation within the framework of the AIDIS Inter-American Congress, and publication of the book *AIDIS 70 años 1948-2018*.

e) Preparation of material for an online course on application of the Evaluation Protocol and other instruments for evaluation of water, sanitation, and hygiene in health facilities, with a view to continuous improvement.

9. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between AIDIS and PAHO:

a) Technical groups to support PAHO in monitoring local governments’ achievement of Sustainable Development Goal 6, which deals with management of the water, sanitation, and hygiene, including response to risks associated with climate change.

b) Continuing evaluation and assessment of the water, sanitation, and hygiene situation in the health facilities of six countries of the Region, applying the Evaluation Protocol developed by ETRAS and the AIDIS Solid Waste Division.

c) A regional meeting to promote public policies related to water, sanitation, and hygiene in health facilities with the countries that have received a diagnosis from the ETRAS Evaluation Protocol, within the framework of strategies for universal access to health and universal health coverage.

d) Development of four workshops (one per subregion) to disseminate safety plans and technologies in the area of water and sanitation, with a view to the construction
of environmentally responsible and resilient communities, taking into consideration the environmental determinants of health.

e) Promotion of the water and sanitation safety framework in local, regional, and national forums.

f) Updating the 2010 Regional Evaluation on Urban Solid Waste Management in Latin America and the Caribbean (EVAL 2010).

g) Training workshops focused on emergencies and disasters, and continued training of the emergency and disaster response group comprised of AIDIS staff and conducted by PAHO experts.

h) Pre-congress seminar before the AIDIS Inter-American Congress organized by PAHO and AIDIS, and participation in the development of technical meetings and roundtables at national, regional, and inter-American congresses on subjects related to water, sanitation, hygiene, and the environment.

i) Preparation and updating of primers, technical standards, and educational material on water quality, sanitation, the environment, climate change, risk management, and disaster response.

j) Participation in celebrating inter-American days dedicated to good management of water, air, and solid waste, with a view to improving the quality of life of the people in the Region and preserving its resources.

k) Formation of and participation in technical groups in six countries of the Amazonian and South American Chaco regions, in order to implement actions that encourage good practices with respect to water, sanitation, and hygiene conditions and adaptation to climate change.

March of Dimes

10. The March of Dimes is dedicated to improving the health outcomes of mothers and babies. Its mission is to prevent birth defects, premature birth, and infant mortality by helping to improve the health of mothers and babies through research and medical support as well as community services, education, and advocacy.

11. Over the past three years, the following activities were carried out under the work plan for collaboration between the March of Dimes and PAHO:

a) The 8th International Conference on Birth Defects and Disabilities in the Developing World, held in Bogotá, Colombia, in November 2017, bringing to light the issues around birth defects surveillance, prevention, and care in the Region.

b) Commemoration of World Birth Defects Day on 3 March 2019 through a regional webinar addressing the problem of birth defects in the Region.

c) Contribution to PAHO’s publications for education of health professionals and other stakeholders about maternal and infant health, such as Systems for
Surveillance of Birth Defects in Latin America and the Caribbean: Present and Future.


12. The following activities are proposed for the next three years (2020-2022) under the March of Dimes/PAHO collaborative work plan:

a) Strengthening birth defects surveillance in Latin America and the Caribbean by promoting analysis based on national registries.

b) Initiating the process of building evidence on rare diseases in Latin America and the Caribbean, including data on prevalence at the regional and country-level, regulatory frameworks, and clinical instruments for screening, diagnosis, and treatment.

c) 10th International Conference on Birth Defects and Disabilities in the Developing World, to be held in Mexico City in 2022, aimed at strengthening surveillance, prevention, and care of birth defects in lower-middle-income countries of the Region.

d) Advocacy around birth defects and preterm birth in the Region during the commemoration of World Birth Defects Day on 3 March and World Prematurity Day on 17 November.

e) Translation and dissemination of a clinical guideline to promote comprehensive, quality care for premature and at-risk newborns.

Pan American Federation of Associations of Medical Schools

13. The Pan American Federation of Associations of Medical Schools (PAFAMS) is an academic organization that works in conjunction with national associations of medical schools throughout the hemisphere. Since its founding in 1962, PAFAMS has pursued its mission to improve the quality of medical education through academic and research activities.

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

a) Support for medical education in the Region. In 2018, PAFAMS resumed implementation of the project to transform medical education by reorienting it to primary health care (PHC), with an emphasis on neglected areas and vulnerable populations. The national presidents of the medical school associations of PAFAMS member countries and deans of faculties participated actively in the project’s three focus areas, namely improving the quality of PHC, promoting
interprofessional collaboration in PHC, and introducing the principal components of PHC as accreditation requirements in their countries.

b) At the XXI Pan American Meeting on Medical Education, carried out within the framework of the Global Meeting on Medical Education in April 2019, PAFAMS presented the Cartagena Declaration, a document that proposes guidelines for transforming workforce training to improve health care and respond to the needs of health systems based on PHC. Signed by the majority of national medical school associations, the Cartagena Declaration responds to the PAHO Strategy on Human Resources for Universal Access to Health and Universal Health Coverage (Document CSP29/10).

15. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between PAFAMS and PAHO:

a) Academic management and curricular innovation in medical schools of the Americas to promote new graduation criteria emphasizing quality PHC that is delivered through the interprofessional teamwork and is aligned with health needs.

b) Continuing implementation of the projects to transform medical education with an orientation to PHC and to strengthen workforce training, with an emphasis on neglected areas and vulnerable populations, by holding workshops and establishing model PHC centers.

c) Education, retention, and retraining of human resources for PHC in marginalized urban and rural areas. This will involve a continuation of efforts begun during the recent triennium to develop a transformational leadership of administrators and professors who can promote and coordinate strategies for quality PHC training.

**Pan American Federation of Nursing Professionals**

16. The Pan American Federation of Nursing Professionals (FEPPEN), founded in 1970, works to:

a) promote the scientific, political, economic, and social development of the nursing profession and of nursing workers in the Region; 

b) define guidelines, goals, and targets that support the collective, cooperative work of its member organizations; and 

c) defend the right to health and social security in the countries of the Region.

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

a) Presentation of the PAHO study on migration of nurses in Latin America at the XXVI Congress of the International Council of Nurses, held in Barcelona, Spain, in 2017.

b) Joint political advocacy actions by FEPPEN and PAHO to help shape nursing education curricula across the Region, as well as coordinated knowledge-sharing actions to support professional development for nurses. A joint report, The
Situation of Nursing Education in Latin America and the Caribbean towards Universal Health, was published in 2017.

c) Review of regulation of the nursing profession in the Americas. The permanent commission of FEPPEN on professional practice analyzed the situation of nursing regulation in the Region and created a classification that was incorporated into a database.

d) Study, analysis, dissemination, and implementation of Nursing Personnel Convention No. 149 of the International Labor Organization.

e) Training of facilitators and nursing professionals who specialize in the treatment and care of newborns.

f) Workshop on respectful and humanized childbirth, carried out in Havana, Cuba, in October 2018, to train nursing professionals who provide maternal and child health care.

18. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between FEPPEN and PAHO:

a) Capacity building to enable nurses to work in collaboration with other professionals to promote positive and sustainable changes in the health system. Toward this end, strategies will be designed for collaboration with ministries of health, universities, and nursing schools in countries of the Region.

b) Establishment of programs for joint work with health authorities, unions, and others to coordinate and follow up on studies of the working conditions of nurses. Steps will be taken to promote the regulation and management of human resources, as well as an appropriate combination and distribution of skills, to ensure adequate quantity and quality of nursing professionals who can meet the needs of people, families, and communities.

c) Actions to enhance the role and coordination of nurses within interprofessional teams in order to improve the management of integrated health services networks and strengthen the first level of care. Support will be provided for interprofessional education and advanced nursing practice in PHC, and reference guidelines will be established for evaluating the results of interprofessional education.

d) Data collection on nursing roles and responsibilities in the countries, and studies of nursing labor conditions. Based on the results, action plans will be developed to promote positive work environments with safe and attractive conditions, as well as economic incentives for the recruitment and retention of nursing professionals.

e) Joint work with the health and education ministries of the countries of the Region to introduce changes in nursing education and policies, with a view to ensuring the availability of learning resources for continuing education on community health. Innovative training programs will focus on universal access to health and on the 2030 Agenda for Sustainable Development, with an emphasis on PHC.
f) Efforts to improve the quality of nursing education through appropriate regulation and accreditation of nursing schools.

United States Pharmacopeial Convention

19. The United States Pharmacopeial Convention (USP) is a scientific nonprofit organization that sets standards for the identity, strength, quality, and purity of medicines, food ingredients, and dietary supplements manufactured, distributed, and consumed worldwide. The USP standards for drugs are enforceable in the United States by the Food and Drug Administration, and the same or similar standards are used in more than 140 countries. USP’s mission is to improve global health through public standards and related programs that help ensure the quality, safety, and benefit of medicines and foods.

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

a) Strengthening regional capabilities to ensure quality of medicines and other health technologies, with special focus on providing technical support for quality control of medical products and interlaboratory testing within the framework of the Caribbean Regulatory System.

b) Participation in and contribution to meetings and discussions of the Pan American Network for Drug Regulatory Harmonization (PANDRH) aimed at supporting pharmaceutical regulatory harmonization in the Americas. These include the IX PANDRH Conference in San Salvador, El Salvador, in October 2018.

21. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between USP and PAHO:

a) Strengthening regional capabilities to ensure quality of medicines and other health technologies, with priority to key regional needs.

b) Strengthening the capabilities of regulatory authorities and laboratories in the Region.

c) Strengthening quality assurance systems in the countries.

d) Generating evidence and disseminating best practices.

e) Supporting PAHO’s work on implementation of the Caribbean Regulatory System.

f) Providing support and guidance to national regulatory authorities and official medicines control laboratories with respect to USP compendial standards.

g) USP will continue to support PANDRH projects with contributions focused on the quality and safety of medicines and other health technologies. Particular attention will be given to regulatory capacities for quality control laboratories, for substandard and counterfeit medical products, and for stability of medicines used in priority programs such as maternal health.
World Association for Sexual Health

22. Founded in 1978, the World Association for Sexual Health (WAS) promotes and advocates for sexual health and sexual rights for all. WAS accomplishes its objectives by advocating, networking, and facilitating the exchange of information, ideas, and experiences, while at the same time conducting scientifically based sexual research, sexual education, and clinical sexology using a transdisciplinary approach.

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

a) PAHO conducted a symposium titled “Why a Wall between Sexual Health and Reproductive Health?” at the 23rd Congress of the World Association for Sexual Health, held in Prague, Czech Republic, in May 2017.

b) In 2018, PAHO and WAS contributed to the preparation of the Global Survey on Sexual Practices, to be carried out by the World Health Organization (WHO). WAS supported the design and validation of the global survey being implemented in Latin America by identifying WAS experts in sexual health research who served as a validation committee.

c) WAS experts and researchers participated in implementation of the global survey by attending a working session on sexual health activities in Latin America and the Caribbean, organized by the Latin American Center of Perinatology, Women and Reproductive Health (CLAP/WR) and WHO in September 2018.

d) In 2019, PAHO participated in the 24th Congress of the World Association for Sexual Health, held in Mexico City, and conducted symposia related to reproductive health and rights.

e) PAHO participated in the WAS Expert Consultation on Sexual Health and Sexual Pleasure, held in New York in May 2019, and co-authored the sexual health consensus.

24. The following activities are proposed for the next three years (2020-2022) under the collaborative work plan between WAS and PAHO:

a) Development of an online sexual health training course for primary care practitioners in English and Spanish.

b) Strengthening of regional capacities to address adolescent sexual health needs, prevent adolescent unplanned pregnancy, and reduce gender-based and sexual violence. With the collaboration of WAS, PAHO will develop actions to update the use of the UNESCO International Technical Guidance on Sexuality Education (school-based and non-school-based) in national health systems, linking it to adolescent-friendly health services.
c) Dissemination of PAHO and WAS work through participation in meetings, such as the XX Latin American Congress of Sexology and Sexual Education to be held in Lima, Peru, in 2020 and the 25th Congress of the World Association for Sexual Health to be held in Cape Town, South Africa, in 2021.

d) Regional dissemination of sexual health material produced by WHO with WAS support and recently made available on the WHO web page on sexual health, and dissemination of any additional relevant material produced during the 2020-2022 period.
Annex C

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

Action on Smoking and Health

1. During 2019, Action on Smoking and Health (ASH) worked on a series of activities to encourage governments to advance tobacco control within their countries by addressing tobacco and human rights. In alignment with the collaborative work plan between ASH and PAHO, ASH:

a) Hosted workshops on human rights and tobacco.
b) Attended the 41st Session of the United Nations (UN) Human Rights Council (HRC).
c) Submitted a written statement to the HRC signed by 20 additional organizations; submitted reports to the HRC in advance of several upcoming universal periodic reviews; and responded to several calls for submissions, including a call from the UN Working Group on Business and Human Rights.
d) Facilitated the process to ensure that the UN Special Rapporteur on the right to health addressed tobacco in his country visit to Ecuador.
e) Met with the head of the WHO Framework Convention on Tobacco Control (FCTC) Secretariat to discuss next steps to advance a decision on tobacco and human rights at the Ninth Session of the Conference of the Parties to the WHO FCTC (COP9). ASH’s language on human rights, and the mandate to have the Secretariat work with the UN Office of the High Commissioner for Human Rights toward a human rights decision for COP9, was included in the final report of the Eighth Session of the Conference of the Parties.
f) Worked to get multiregional support for the adoption of a resolution on tobacco by the Human Rights Council in June 2020.

American Speech-Language-Hearing Association

2. During 2019, the American Speech-Language-Hearing Association (ASHA) continued to implement the work plan agreed with PAHO, with the following activities:

a) Continued direct technical assistance to Belize, where a second workshop, “Working with Children with Hearing Loss and Autism,” was held.
b) Initial discussions between representatives of ASHA, PAHO, and the Ministry of Public Health in Ecuador were conducted, and a request for technical assistance
was considered. Additionally, a needs-assessment trip to develop a technical support plan for Ecuador took place and new country opportunities were explored.

c) ASHA participated in the National Institutes of Health Regional Workshop on Rehabilitation and Assistive Technology in the Americas carried out by PAHO, and in the WHO Rehabilitation 2030 meeting in Geneva.

d) ASHA continued to promote the collaboration between ASHA and PAHO to its members, including through four education seminars at the ASHA Convention in November 2019. At the convention, representatives discussed WHO Rehabilitation 2030: A Call for Action, focusing on the Americas. ASHA’s Special Interest Group 17, Global Issues in Communication Sciences and Related Disorders, organized a webchat on the collaboration between ASHA and PAHO. ASHA continued to promote World Hearing Day.

**Drugs for Neglected Diseases Initiative**

3. A number of activities were carried out in 2019 by the Drugs for Neglected Diseases Initiative (DNDi) as part of the collaboration with PAHO for the 2018-2020 triennium.

a) On Chagas disease, DNDi:

- Contributed consistently, through collaboration with countries, to recommendations for advancement of the PAHO Framework for Elimination of Mother-to-Child Transmission of HIV, Syphilis, Hepatitis B, and Chagas (EMTCT Plus).
- Supported a workshop in Colombia on congenital transmission of Chagas disease in the context of International Chagas Day.
- Developed and implemented integrated strategies to document, identify, manage, prevent, control, and eliminate priority infectious diseases in select countries of the Americas.
- Through DNDi’s Chagas Treatment Access Project, worked with governments and other stakeholders to develop comprehensive programs to address barriers, control transmission, and provide care to people affected by Chagas disease. The project is currently promoting action plans on Brazil, Colombia, and Guatemala.
b) Activities on leishmaniasis included:

- Continuation of the retrospective study to assess the effectiveness of AmBisome for the treatment of HIV viral load co-infected patients.
- Planning of collaboration to evaluate effectiveness of thermotherapy and intralesional meglumine antimoniate for the treatment of uncomplicated cutaneous leishmaniasis in Central America (Costa Rica, El Salvador, and Guatemala), according to the PAHO treatment recommendation guideline for the Americas.

c) Collaboration on health systems and services and on medicines and health technologies included discussions promoted by PAHO around the price transparency of medicines, according to the mandate established in Resolution CD55.R10.

d) Collaboration on viral hepatitis continued.

4. In meetings of MERCOSUR and the Andean Region, and at country level, DNDi worked to:

a) Disseminate information about the availability of affordable options for procurement of hepatitis C treatment, including through the PAHO Strategic Fund, as a strategy for scaling up access to medicines in the Region of the Americas.

b) Introduce international experiences from Egypt, Malaysia, and other countries in discussions of ways that the Region of the Americas could simplify models of care for hepatitis C treatment and bring care closer to patients.

c) Leverage PAHO’s investment cases on hepatitis C as an important tool for securing additional country commitment to diagnosis and treatment of hepatitis C in the Region.

Framework Convention Alliance

5. The Framework Convention Alliance (FCA) undertook the following activities during 2019 as part of its collaborative work plan with PAHO:

a) Supported the implementation of the WHO Framework Convention on Tobacco Control (FCTC).

b) Coordinated with PAHO on a regional webinar for analyzing outcomes of the Eighth Session of the Conference of the Parties to the FCTC (COP8), in which an FCA policy advisor presented a civil society perspective.

c) Provided support to PAHO on a regional webinar for reviewing outcomes of the First Session of the Meeting of the Parties (MOP1) to the Protocol to Eliminate Illicit Trade in Tobacco Products, and hosted a civil society lecturer.
d) Co-organized, with Corporate Accountability, a regional webinar to celebrate the tenth year of FCTC Article 5.3. PAHO provided support for this webinar. FCA and the FCTC Knowledge Hub of Uruguay jointly organized a regional webinar on implementation of the protocol on illicit trade.

e) Strengthened regional capacity to support FCTC ratification and implementation. FCA has been actively advising the FCTC Knowledge Hub of Uruguay. FCA participated in regional coordination calls with the PAHO team and other key tobacco control players, such as the Campaign for Tobacco-Free Kids, the International Union Against Tuberculosis and Lung Disease, and the InterAmerican Heart Foundation, to support tobacco control actions in Chile, the Dominican Republic, Ecuador, and Peru.

**Healthy Caribbean Coalition**

6. The Healthy Caribbean Coalition (HCC) conducted a number of successful activities as part of its collaborative work plan with PAHO in 2019. In its work on the prevention of childhood obesity and other noncommunicable disease risk factors, HCC:

a) Continued to promote the “My Healthy Caribbean School” initiative. The Bahamas Ministry of Health has expressed interest in using the platform to assess the local school environments, and civil society organizations in Barbados have also used it extensively. Challenges to uptake continued in Jamaica and Trinidad and Tobago.

b) Worked with PAHO and the Global Health Advocacy Incubator to support front-of-pack nutritional labeling (FOPL) in the Region. Activities included advocacy, capacity building among civil society organizations in target countries, development of information resources to support advocacy and counter industry arguments, information gathering on the process for responding to deviations, and development of public service announcements for FOPL.

c) Hosted a regional multi-stakeholder meeting on accelerating nutrition policy in the Region.

d) Held the 3rd Annual Caribbean Alcohol Reduction Day (CARD) in 2018 on the theme “Youth: Let’s Talk about Alcohol.” This was followed by the 4th CARD in 2019, whose theme was “Women and Alcohol.”

e) Worked on strengthening the multisectoral response and held five virtual meetings of the Chairs of the National NCD Commissions.

f) Had its fifth round of funding from the Australian Direct Aid Program, with relation to cervical cancer prevention and control. The grant supports work to increase access to education, screening, and human papilloma virus (HPV) vaccination in vulnerable communities in Belize and Guyana.

**InterAmerican Heart Foundation**

7. The InterAmerican Heart Foundation (IAHF) conducted activities in the areas of regional and international campaigns and advocacy during 2019 in alignment with the agreed work plan between IAHF and PAHO, which includes:

a) Regional and international campaigns: IAHF worked to:

   a) gain traction in support of universal health care and NCD prevention at the UN High-Level Meeting on Universal Health Coverage; 
   b) to limit tobacco company interference in policy making through a letter to delegates at the 74th United Nations General Assembly; and 
   c) to limit oil company interference in the adoption and application of the UN Framework Convention on Climate Change. IAHF continued to provide information on NCD prevention and control through various channels and networks, including the Healthy Latin American Coalition (CLAS); Global Bridges, a collaboration for the treatment of nicotine dependence; Latin American Coordinating Committee on Tobacco Control (CLACCTA); and Latin American Action on Salt and Health (ALASS).

b) Advocacy: activities on NCDs that were developed for the Third UN High-Level Meeting on Non-communicable Diseases in 2018 continued in 2019 with country-wide coalition support in Costa Rica, Ecuador, Guatemala. In these countries, activities were carried out to promote legislation on front-of-pack nutritional labelling, to raise taxes on tobacco and other unhealthy products, to limit promotion of unhealthy foods and beverages to children and adolescents, to promote plain packaging of tobacco, and so on.

**Inter-American Society of Cardiology**

8. In accordance with the agreed work plan, the Inter-American Society of Cardiology (IASC) participated in the following initiatives and events:

a) In collaboration with the World Heart Federation (WHF), IASC launched an initiative to tackle the problem of Chagas disease with the creation of a WHF road map toward the “25 by 25” goal. Three meetings were held with regional leaders of scientific societies, foundations, academic institutions, groups representing patients, and ministry of health officials to highlight ways to improve the situation of vulnerable populations affected by this disease.

b) IASC, WHF, and the Parliamentarians Union of South America and MERCOSUR held the First MERCOSUR Health Summit in Rosario, Argentina. The event brought together representatives of scientific institutions, lawmakers from the MERCOSUR countries, and health officials, who addressed issues of access to health services and medicines as well as healthy public policies. The convention issued the Rosario Declaration, which is intended to serve as a starting point for analysis in other regional meetings and as a reference document for officials and lawmakers.
c) IASC, acting through cardiology societies across the Region, participated in World Heart Day with a variety of actions held both before and after the event. In addition, online courses were launched on cardiovascular prevention and on heart disease in women.

d) The XXVII Interamerican Congress of Cardiology, which had the objective of supporting the HEARTS initiative and participation of 80 global experts.

e) A session to promote the formation and certification of Cardiovascular Prevention Units that meet normative standards of procedure. This is a multidimensional project comprising education at every level, care, and research.

Latin American and Caribbean Women’s Health Network

9. The Latin American and Caribbean Women’s Health Network (LACWHN) and PAHO collaborate under an agreed work plan that emphasizes three areas: a) advocacy for women’s, children’s, and adolescents’ health; b) celebration of International Women’s Day; and c) production of gender-disaggregated statistics in the area of gender equality and the SDGs. During 2019, LACWHN:

a) Disseminated technical information on health of migrant women and maternal health and disaggregated data on indigenous and Afro-descendent women’s health.

b) Promoted gender mainstreaming in health as part of the 2030 Agenda. The coordinator of LACWHN participated in the 57th Directing Council of PAHO and continued to coordinate side events within the Regional Conference on Women.

c) Worked to continue the implementation of the program ¡Derechos aquí y ahora! (Right Here, Right Now). This program’s main objective is to ensure that the sexual and reproductive rights of young people, women, and lesbian, gay, trans, bisexual, and intersex (LGBTI) people are respected and guaranteed, and that these populations are free from stigma, discrimination, and violence.

Latin American Association of Pharmaceutical Industries

10. During 2019, the Latin American Association of Pharmaceutical Industries (ALIFAR) carried out a number of activities under its collaborative work plan with PAHO. Within the framework of the Pan American Network for Drug Regulatory Harmonization (PANDRH), ALIFAR undertook a new voice recording and formal correction of the text in two of the four modules of the virtual course on health regulation of biological and biotechnological products.
11. ALIFAR also participated in the following:

a) The virtual meeting of the PANDRH Steering Committee in June 2019. The agenda included:  
   a) a report on progress in the subregions;  
   b) projects agreed, developed, and implemented by PANDRH members;  
   c) a review of the PANDRH strategic development plan for 2014-2020; and  
   d) consideration of the draft of A Framework for Evaluating and Publicly Designating Regulatory Authorities as WHO-Listed Authorities (WHO working document QAS/19.808).

b) A virtual meeting between PAHO, ALIFAR, and FIFARMA to analyze the content and characteristics of the virtual course on health regulation of biological and biotechnological products.

c) The ALIFAR annual meeting in May 2019 where the situation in each country was analyzed with respect to public health, medicines, health regulations, marketing of medicines, international commercial negotiations, and intellectual property rights.

d) Meeting of the pharmaceutical industry chambers of Argentina, Brazil, Paraguay, and Uruguay to consider regulations on the registration of synthetic, semi-synthetic, biological, and biotechnological medicines, as well as regulations on marketing and intellectual property. There was an exchange of views on the topics addressed by MERCOSUR Working Subgroup 11 on Health and on the draft of WHO concept note: A framework for evaluating and publicly designating regulatory authorities as WHO-listed authorities (working document QAS/19.808).

e) The midterm meeting in November 2019 between ALIFAR officials and associated national chambers for the purpose of analyzing and evaluating each country’s situation with regard to public health, medicines, health regulations, marketing of medicines, international commercial negotiations, and intellectual property rights.

**Latin American Confederation of Clinical Biochemistry**

12. During 2019, the Latin American Confederation of Clinical Biochemistry (COLABIOCLI) carried out the following activities under the agreed collaborative work plan with PAHO:

a) Update on external quality evaluation: a pilot was organized for the purpose of conducting an initial survey with ten laboratories from each participating country (Bolivia, Costa Rica, Dominican Republic, Ecuador, El Salvador, Guatemala, Honduras, Paraguay, and Panama).

b) Virtual education on quality management and good laboratory practices for university professors: a distance learning course of 352 hours in duration was held, with 127 active participants.

c) Two-day workshop for university professors specializing in quality management and good laboratory practices.
d) Adaptation of the course “Quality Management and Good Laboratory Practices” to meet the requirements of PAHO surveillance programs: a workshop was held to review and adapt this course for use by the networks on epidemiological surveillance of arbovirus, influenza, and other respiratory viruses.

e) Support for replicating the course “Quality Management and Good Laboratory Practices for Tuberculosis” in classrooms at the national level: instructional materials and slides in Spanish and English were prepared to facilitate the replication of this course.

f) Provision of technical assistance on quality management to national reference laboratories: a workshop was held on strengthening the system for training human resources in quality management. A 40-hour course, “Quality Management in the Clinical Analysis Laboratory,” was offered for the State Network of Clinical Laboratories in Chiapas, Mexico.

**Latin American Federation of the Pharmaceutical Industry**

13. In 2019, the Latin American Federation of the Pharmaceutical Industry (FIFARMA) carried out the following activities related to the harmonization of pharmaceutical regulation under the agreed collaborative work plan with PAHO:

a) Continued work on the project “Assessing CPP requirements for drug registration processes in the Region of the Americas towards more timely access to medicines and more convergent regulatory approaches,” jointly with the Center for State Control of Drugs, Equipment and Medical Devices (CECMED) in Cuba. Reports on the results were shared with the members of the Pan American Network for Drug Regulatory Harmonization (PANDRH).

b) Participated actively as a member in meetings of the PANDRH Steering Committee.

14. PAHO and FIFARMA collaborated on the development of a virtual course, “Health Regulation of Biological and Biotechnological Products,” which was offered to the national regulatory authorities of 18 countries through the PAHO Virtual Campus for Public Health.

15. An initial analysis was conducted to provide a basis for discussions of a comprehensive strategy against substandard and/or counterfeit drugs, in accordance with the collaborative plan between PAHO and FIFARMA.

**Latin American Society of Nephrology and Hypertension**

16. During 2019, the Latin American Society of Nephrology and Hypertension (SLANH) collaborated with PAHO in the following areas:
a) National registries of patients receiving renal replacement therapy: a workshop on dialysis and transplantation registries was held during the regional meeting “Toward a Strategic Plan for Nephrology in Central America and the Caribbean,” organized by the Central American and Caribbean Association of Nephrology and Hypertension (ACECANH) in the Dominican Republic in May 2019. The workshop participants reviewed the current situation of these registries in the Region, as well as progress made, principal challenges, and possible solutions.

b) Development of educational strategies for the implementation of renal health programs in the Region: the online course “Prevention and Management of Chronic Kidney Disease for Primary Health Care Teams” continues to be offered through the PAHO Virtual Campus for Public Health, with 21,462 persons enrolled. The content and recordings were developed by SLANH and Latin American experts.

c) Development and launch of the online course “Peritoneal Dialysis for the Multidisciplinary Primary Care Team.” The content and recordings were developed by members of the Peritoneal Dialysis Committee of SLANH and Latin American experts. The number of enrolled participants came to 6,578.

d) Virtual seminar, “Renal Health for All in Latin America,” for World Kidney Day 2019: this seminar, organized by PAHO in collaboration with SLANH, discussed how to achieve renal health, access to diagnosis and treatment of renal disease for all inhabitants of Latin America, and achievements to date in Colombia and Guatemala.

e) Clinical practice guidelines on chronic kidney disease: SLANH has begun the process of updating its guides to prevention, diagnosis, and management of chronic kidney disease. These guides, published more than five years ago, are to be updated with technical support from PAHO and from prominent specialists in the field of Latin American nephrology.

**Mundo Sano Foundation**

17. During 2019, the Mundo Sano Foundation participated in a number of activities aimed at promotion and implementation of the Framework for Elimination of Mother-to-Child Transmission of HIV, Syphilis, Hepatitis B, and Chagas (EMTCT Plus), which include:


b) Training day on EMTCT Plus for health workers in Pilar, Buenos Aires province, Argentina.

c) Participation in the XIX International Symposium on Neglected Diseases, in which PAHO gave a presentation on the EMTCT Plus strategy in the Americas.
d) Implementation of the EMTCT Plus strategy in the triple border area of the Salta Chaco region (spanning localities in Argentina, Bolivia, and Paraguay) and in the municipality of Almirante Brown in Buenos Aires province, Argentina.

e) Launch of the campaign “No Baby with Chagas Disease” in order to lend visibility to the vertical transmission of Chagas disease.

f) Participated in a continuing education workshop on Chagas disease and syphilis within the framework of the EMTCT Plus strategy, organized by the Argentine Society of Pediatrics.

g) Implemented a project to reduce the impact of Chagas disease in the Department of Jutiapa in Guatemala, within the framework of Partnerships for the Elimination of Chagas Disease as a Public Health Problem in Central America and Mexico. The entomological information collected by this project in the Department of Jutiapa was made available for consideration in the process of certification of the elimination of Chagas disease due to *Rhodnius prolixus* in Guatemala, led by PAHO.

**National Alliance for Hispanic Health**

18. During 2019, the National Alliance for Hispanic Health (NAHH) worked closely with its technical focal points at PAHO in the area of cancer and cardiovascular disease prevention and control through the Buena Salud Américas initiative. NAHH established this initiative in order to join efforts with PAHO to promote and support multisectoral collaboration and engagement of community leadership and civil society throughout the Americas in the prevention and control of NCDs.

19. Through the Buena Salud Américas initiative, NAHH continued to collaborate with PAHO on the following activities:

a) Supporting dissemination of cancer program materials and resources, including the PAHO Plan of Action for Cervical Cancer Prevention and Control 2018-2030 (Document CD56/9), which helped guide the implementation of effective cervical cancer prevention programs in the Region of the Americas.

b) Identifying and sharing successful community-based practices and intersectoral approaches for capacity building and partnerships with civil society and community leadership at the country level.

c) Promoting information sharing and online communication in support of community-based efforts to address NCDs through the implementation of collaborative social media activities with networks of community-based organizations and civil society groups.

d) Support for community-based organizations in Bolivia, Brazil, Colombia, and Guatemala through community engagement grants to help them build capacity for local advocacy and implement local initiatives to increase awareness about cervical cancer and the benefits of human papilloma virus (HPV) vaccination among
community members and the providers who served them. The grant recipients also helped disseminate trusted and accurate information about cervical cancer prevention and HPV.

e) Development of a toolkit on HPV vaccination and cervical cancer prevention. The toolkit, intended for use by civil society and the public health community in the Americas, provides accurate and evidence-based information to raise awareness of the vaccine’s effectiveness in the prevention of cervical cancer. PAHO’s campaign “It’s Time to End Cervical Cancer” helped inform the development of the toolkit, along with other resources from the U.S. Centers for Disease Control and Prevention, the National Cancer Institute, and the American Cancer Society, and the campaign is included in the resources section of the toolkit. When completed, the toolkit will be disseminated through NAHH’s member network for local adaptation.

f) Commemoration of World No Tobacco Day 2019. PAHO representatives participated as speakers for the webinar “Promoting Tobacco Cessation through Evidence-based Clinical Interventions and Global Awareness Campaigns,” organized by NAHH’s Nuestras Voces (Our Voices) Network Program.

**Sabin Vaccine Institute**

20. The Sabin Vaccine Institute (Sabin) continues to support the work plan between Sabin and PAHO focused on education, training, evidence generation, and advocacy initiatives concerning immunization and the introduction and use of new vaccines in the Region of the Americas.

21. Sabin works in three main areas: vaccine access and uptake, knowledge and innovation, and research and development. It routinely partners with PAHO on symposia, training courses, and similar events. In addition, both organizations are working on a number of research studies dealing with a variety of vaccine-preventable and other infectious diseases.

22. Current and recently completed projects include the following:

a) Meningococcal disease: Sabin, together with the Oswaldo Cruz Institute/Oswaldo Cruz Foundation and the Austral University School of Medicine, convened the Latin America Meningococcal Workshop. With the technical support of PAHO and regional partners, Sabin published a comprehensive meeting report in preparation for the 2019 meeting of PAHO’s Technical Advisory Group (TAG) on Vaccine-preventable Diseases.

b) Pertussis: the Latin American Pertussis Project (LAPP), established in 2009, is a collaboration between Sabin, PAHO, the U.S. Centers for Disease Control and Prevention (CDC), and select Latin American ministries of health to strengthen pertussis surveillance in the Region. In 2019, Sabin convened more than 70 stakeholders from 17 countries in Buenos Aires, Argentina, to review the latest
developments in the field of pertussis. Sabin published and circulated a meeting report, outlining key suggestions and recommending next steps for pertussis vaccine strategies and research in Latin America.

c) Missed opportunities for vaccination: PAHO, with support from Sabin, is implementing an initiative to address missed opportunities for vaccination in the Region and strengthen health systems and national immunization programs to reduce immunization equity gaps.

d) Dengue vaccine: Sabin and the Brazilian Ministry of Health are implementing a study to evaluate the effectiveness and safety of the live-attenuated chimeric tetravalent dengue vaccine in Paraná, Brazil.

e) Vaccinology: Sabin hosted the annual Ciro de Quadros vaccinology course in Latin America with PAHO’s support. This course convened national and subnational immunization managers from Central and South America along with leading experts in the field of vaccinology to familiarize the managers with current global and regional vaccines and vaccination guidelines.

f) Lymphatic filariasis control: Sabin, PAHO, the Ministry of Health of Guyana, the CDC, and the U.S. Agency for International Development implemented a mass drug administration campaign for lymphatic filariasis control and elimination in Guyana. The campaign focused on strengthening national social mobilization programs and on program monitoring and evaluation.

**World Resources Institute Ross Center for Sustainable Cities**

23. During 2019, the World Resources Institute Ross Center for Sustainable Cities (WRI) carried out the following activities in alignment with the agreed work plan between WRI and PAHO:

a) Leveraging better data to improve road safety: PAHO and WRI recognize that reliable and accurate georeferenced data are needed to achieve key objectives, as data make it possible to identify factors affecting traffic safety, develop targeted interventions, set targets, and monitor impact. Both organizations are working in this area in Brazil, Colombia, and Mexico, among other countries. PAHO also participated in the Ibero-American Road Safety Observatory (OISEVI) training event on crash injury data.

b) Working in Caribbean countries to support the development of a Road Safety Strategy: WRI completed a small project on road safety in Santo Domingo, Dominican Republic, and reached agreement with PAHO to develop a collaboration strategy to continue its work in that country.

c) Hosting and participating in road safety webinars, workshops, and other events on topics of common interest. These included national and city-level strategies on road safety; the Vision Zero/Safe Systems approach; promotion of biking and physical activity; data systems for road safety; speed management and enforcement; road safety around school zones and corridors; the Walk21 2019 Conference held in
Rotterdam, Netherlands; and the V General Assembly of the Iberoamerican Road Safety Observatory (OISEVI 2019) held in Cartagena, Colombia.

d) Vision Zero challenge in Latin America: WRI kept PAHO informed about the progress of this initiative, encouraged participation and collaboration at related events and webinars, and sought PAHO’s advice throughout the different phases.

e) Translation of documents and publications: brief guides and brochures were developed and translated, such as a speed management guide for Bogotá.
**Annex D**

**SCHEDULE OF REVIEWS OF NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO**  
(as of 1 January 2020)

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* Renewal of status process was deferred from 2019 to 2020 by decision of the 164th Session of the Executive Committee.
PROPOSED RESOLUTION

NON-STATE ACTORS IN OFFICIAL RELATIONS WITH PAHO

THE 167th SESSION OF THE EXECUTIVE COMMITTEE,

(PP1) Having reviewed the report Non-State Actors in Official Relations with PAHO (Document CE167/3);

(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 non-State actors for a period of three years:

a) American Public Health Association;
b) American Society for Microbiology;
c) Inter-American Association of Sanitary and Environmental Engineering;
d) March of Dimes;
e) Pan American Federation of Associations of Medical Schools;
f) Pan American Federation of Nursing Professionals;
g) United States Pharmacopeial Convention, and
h) World Association for Sexual Health.
(OP)2. To admit the following non-State actors into official relations with PAHO for a period of three years:

a) American Heart Association;
b) Basic Health International, and
c) Global Oncology.

(OP)3. 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: 3.3 Non-State Actors in Official Relations with PAHO

2. Linkage to Program Budget of the Pan American Health Organization 2020-2021:

This resolution proposes continuing official relations with eight non-State actors (NSAs) and to admit three non-State actors into official relations with PAHO, whose collaborative relationship was reviewed. All collaborative work plans are linked to at least one of the outcomes of the PAHO Strategic Plan and the Program Budget.

- **American Public Health Association**
  - OCM 21: Data, information, knowledge, and evidence
  - OCM 26: Cross-Cutting Themes: Equity, Ethnicity, Gender, and Human Rights
  - OCM 27: Leadership and governance

- **American Society for Microbiology**
  - OCM 12: Risk factors for communicable diseases

- **Inter-American Association of Sanitary and Environmental Engineering**
  - OCM 18: Social and environmental determinants

- **March of Dimes**
  - OCM 2 Health throughout the life course

- **Pan American Federation of Associations of Medical Schools**
  - OCM 7: Health workforce

- **Pan American Federation of Nursing Professionals**
  - OCM 7: Health Workforce

- **United States Pharmacopeial Convention**
  - OCM 8: Access to health technologies

- **World Association for Sexual Health**
  - OCM 2: Health throughout the life course
  - OCM 4: Response capacity for communicable diseases
### American Heart Association

OCM 13: Risk factors for noncommunicable diseases reduced by addressing the determinants of health through intersectoral action  
OCM 14. Malnutrition in all its forms reduced

### Basic Health International

OCM 5: Access to services for NCDs and mental health conditions

### Global Oncology

OCM 5: Access to services for NCDs and mental health conditions

#### 3. Financial implications:

a) **Total estimated cost for implementation over the lifecycle of the resolution (including staff and activities):** N/A

b) **Estimated cost for the 2020-2021 biennium (including staff and activities):**  
   None

c) **Of the estimated cost noted in b), what can be subsumed under existing programmed activities?**  
   All costs are included in existing activities of the biennial work plan.

#### 4. Administrative implications:

a) **Indicate the levels of the Organization at which the work will be undertaken:**

<table>
<thead>
<tr>
<th>NSA</th>
<th>NSA</th>
<th>Regional</th>
<th>Subregional</th>
<th>Country</th>
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<tbody>
<tr>
<td>American Public Health Association</td>
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<tr>
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<td>Global Oncology</td>
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</tbody>
</table>

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 (2020-2022)
Analytical Form to Link Agenda Item with Organizational Mandates

1. **Agenda item:** 3.3 Non-State Actors in Official Relations with PAHO

2. **Responsible unit:** Department External Relations, Partnerships and Resource Mobilization (ERP)

3. **Preparing officer:** Mr. Alberto Kleiman, Director, ERP, in collaboration with the following technical focal points:
   
a) American Public Health Association - Nicolas Lagomarsino, DD Office
b) American Society for Microbiology - Pilar Ramon, CDE
c) Inter-American Association of Sanitary and Environmental Engineering - Patricia Segurado, PER
d) March of Dimes - Pablo Duran, CLAP
e) Pan American Federation of Associations of Medical Schools - Jose Garcia Gutierrez, HSS
f) Pan American Federation of Nursing Professionals - Silvia Cassiani, HSS
g) United States Pharmacopeial Convention - Analia Porras/Maria Pombo, HSS
h) World Association for Sexual Health - Rodolfo Gomez, CLAP
i) American Heart Association – Leendert Nederveen, NMH
j) Basic Health International - Silvana Luciani, NMH
k) Global Oncology - Silvana Luciani, NMH

4. **Link between Agenda item and the Sustainable Health Agenda for the Americas 2018-2030:**

   **American Public Health Association**

   Goal 7: Develop capacity for the generation, transfer, and use of evidence and knowledge in health, promoting research and innovation, and the use of technology

   Target 7.2 Develop institutional capacities, infrastructure, technology, and qualified human resources for public health research and its dissemination, in accordance with national health policy

   **American Society for Microbiology**

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

   Target 10.8 Treat and prevent infectious diseases, including the responsible and rational use of safe, effective, accessible, and affordable quality-assured drugs
**Inter-American Association of Sanitary and Environmental Engineering**

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

Target 11.2 Reduce substantially the number of deaths and diseases caused by hazardous chemicals and by pollution and air, water, and soil pollution, especially where environmental risk may be disproportionately impacting disadvantaged populations or communities

Target 11.3 Reduce significantly inequities related to water quality and sanitation by moving forward with the responsible sectors on access to water and sanitation services and the safe management thereof

**March of Dimes**

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

Target 1.3 Reduce the neonatal mortality rate to less than 9 per 1,000 live births in all population groups, including those most at risk (indigenous, Afro-descendent, Roma, and rural population, among others, as applicable in each country), and under-5 mortality to less than 14 per 1,000 live births

**Pan American Federation of Associations of Medical Schools**

Goal 3: Strengthen the management and development of human resources for health with skills that facilitate a comprehensive approach to health

Target 3.2 Develop HRH policies and intersectoral coordination and collaboration mechanisms between health and education, as well as other social actors, to address the requirements of the health system and the health needs of the population

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

**Pan American Federation of Nursing Professionals**

Goal 3: Strengthen the management and development of human resources for health (HRH) with skills that facilitate a comprehensive approach to 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

**United States Pharmacopeial Convention**

Goal 5: Ensure access to essential medicines and vaccines, and to other priority health technologies, according to available scientific evidence and the national context

Target 5.3 Have in place a national regulatory authority for medicines rated at level-3 capacity based on the WHO global benchmarking tool

**World Association for Sexual Health**

Goal 1: Expand equitable access to comprehensive, integrated, quality, people- family- and community–centered health services, with an emphasis on health promotion and disease prevention
<table>
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<tr>
<th><strong>Target 1.4</strong> 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.</th>
</tr>
</thead>
</table>

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

**Target 9.4** Contribute to the significant reduction of violence and its impact on health, in collaboration with other government and nongovernmental actors

**American Heart Association**

**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

**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

**Basic Health International**

**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

**Global Oncology**

**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

**5. Link between Agenda item and the Strategic Plan of the Pan American Health Organization 2020-2025:**

- **American Public Health Association**
  - OCM 21: Data, information, knowledge, and evidence
  - OCM 26: Cross-Cutting Themes: Equity, Ethnicity, Gender, and Human Rights
  - OCM 27: Leadership and governance

- **American Society for Microbiology**
  - OCM 12: Risk factors for communicable diseases

- **Inter-American Association of Sanitary and Environmental Engineering**
  - OCM 18: Social and environmental determinants
March of Dimes
OCM 2 Health throughout the life course

Pan American Federation of Associations of Medical Schools
OCM 7: Health workforce

Pan American Federation of Nursing Professionals
OCM 7: Health Workforce

United States Pharmacopeial Convention
OCM 8: Access to health technologies

World Association for Sexual Health
OCM 2: Health throughout the life course; OCM 4: Response capacity for communicable diseases

American Heart Association
OCM 13. Risk factors for noncommunicable diseases reduced by addressing the determinants of health through intersectoral action
OCM 14. Malnutrition in all its forms reduced

Basic Health International
OCM 5: Access to services for NCDs and mental health conditions

Global Oncology
OCM 5: Access to services for NCDs and mental health conditions

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

Inter-American Association of Sanitary and Environmental Engineering
- Institutions Responsible for water and sanitation in the region, some are ministries and other dependencies of the Ministries of Health, Housing, Environment and Development
- ADERASA, Association of Regulatory Entities of Water and Sanitation
- Research centers in water and sanitation in the countries
- Associations of water and sanitation service providers

Pan American Federation of Associations of Medical Schools
- PAHO/WHO Collaborating centers on medical education:
  o Faculty of Medicine. University of Sherbrooke – Canada
  o School of Medicine at Rockford – University of Illinois – USA
  o School of Health Sciences – University of New Mexico - USA
- National Associations of Medical Schools (in each Member State, which are affiliated to PAFAMS/FEPAFEM)
### Pan American Federation of Nursing Professionals

- **BRA-59** WHO CC for Education of Health Technicians. Escola Politécnica de Saúde Joaquim Venancio (EPSJV), Fundação Oswaldo Cruz (FIOCRUZ)
- **CAN-39** WHO CC in Primary Care Nursing and Health Human Resources. School of Nursing, Faculty of Health Sciences, McMaster University
- **JAM-15** WHO CC for Nursing and Midwifery Development in the Caribbean. School of Nursing (UWISON), University of the West Indies
- **USA-193** WHO CC for International Nursing Development in Primary Health Care. College of Nursing, University of Illinois at Chicago
- **USA-206** WHO CC for Nursing and Midwifery Leadership. School of Nursing, University of Pennsylvania
- **USA-241** WHO CC for International Nursing. School of Nursing, University of Alabama at Birmingham (UAB)
- **USA-272** WHO CC for Advanced Practice Nursing. School of Nursing, Columbia University
- **USA-297** WHO CC for Nursing Information, Knowledge Management and Sharing. Center for Global Nursing, Johns Hopkins School of Nursing
- **CHI-19** WHO CC for Health Services and Nursing Development for Noncommunicable Disease Care Escuela de Enfermería, Pontificia Universidad Católica de Chile
- **MEX-19** WHO CC for the Development of Professional Nursing Escuela Nacional de Enfermería y Obstetricia, Universidad Nacional Autónoma de México
- **USA-283** WHO CC for Research and Clinical Training in Health Promotion Nursing School of Nursing, Office of International Affairs, University of Michigan
- **USA-349** WHO CC for Nursing Human Resources Development and Patient Safety School of Nursing and Health Studies, University of Miami
- **TRI-01** WHO CC in Nursing Policies and Leadership. School of Nursing, UWI at St. Augustine

### United States Pharmacopeial Convention

- **CAN-94**: WHO CC for Standardization and Evaluation of Biologicals: Biologics and Generics Therapies Directorate, Health Products and Food Branch, Health Canada
- **USA-289**: WHO CC for Standardization and Evaluation of Biologicals: Center for Biologics Evaluation and Research (CBER) / Food and Drug Administration (FDA)
- **CARPHA/CRS**: Caribbean Regulatory System
- **Ministries of Health in the Region of the Americas, National Regulatory Authorities of Medicines (NRAs), and National Official Control Laboratories (NOCL)
- **Pan American Network for Drug Regulatory Harmonization (PANDRH)

### American Heart Association

- University of South Florida, WHO Collaborating Centre on Social Marketing
- **NCD Child**
- **Ministries of Health from the Region of the Americas**
7. Best practices in this area and examples from countries within the Region of the Americas:

**American Public Health Association**

Since 2013, PAHO’s Pan American Journal of Public Health has been working with APHA’s American Journal of Public Health in the translation into Spanish and publication in the former of manuscripts relevant to the Region of the Americas, freely accessible through both journal websites. Currently, the journals are exploring a joint project involving the production and publication of new evidence on preparedness for emergencies and disasters.

**American Society for Microbiology**

- Support to build microbiology capacity for detection and monitoring of antimicrobial resistance in selected countries, thru the nomination of ASM Ambassadors.
- Contribute to technical discussions and regional initiatives to strengthen and expanding the capacity of National Reference Laboratories participating in the Latin America and Caribbean Antimicrobial Resistance Surveillance Network (coordinated by PAHO).
- Sharing of experiences and lessons learnt from other regions (training materials, guidance documents).
- Joint development of proposals for resource mobilization to consolidate surveillance of blood stream infections in Ecuador and Chile.

**Inter-American Association of Sanitary and Environmental Engineering**

A good AIDIS practice that we value greatly is the dissemination of knowledge, through its chapters in the countries the most important information on water and sanitation is disseminated, which allows guiding countries on the best prevention measures and reducing health risks related to water and sanitation systems. Similarly, in the face of emergencies, they have been the first to make their network of chapters available, supporting them at the regional and national levels, disseminating the guidelines provided by PAHO / WHO to the governing and provider institutions of water and sanitation services, allowing the attention of this environmental determinant in the countries.

**March of Dimes**

A network of experts working on birth defects surveillance was established; advocacy on birth defects was strengthened in the countries, a baseline was established on programs and resources on newborn screening; the experience from LAC on birth defects surveillance was presented globally.

**Pan American Federation of Associations of Medical Schools**

Medical schools actively engaged in the transformation of medical education towards Universal Health, on the basis of advancing social accountability and interprofessional education. Best practices can be found in Canada, USA, Mexico, Jamaica, Barbados, Trinidad and Tobago, Guyana, Cuba, Brazil, Argentina, Venezuela, Bolivia, Chile, Perú and Colombia

PAFAMS/FEPAFEM will be a key partner for PAHO in supporting these initiatives at the Regional level.
Pan American Federation of Nursing Professionals

“Perspectivas y contribuciones de enfermería para promover la Salud Universal”,
https://iris.paho.org/handle/10665.2/52115

“Perspectives and contributions of nursing to promotion of Universal Health”,
https://iris.paho.org/handle/10665.2/52121

United States Pharmacopeial Convention

NRAs in the Region of the Americas have been key to promoting global changes for the implementation of a common tool to benchmark NRAs capacities and to promote strengthening of regulatory systems as well as South-South Cooperation among countries. According to WHO and PAHO, strengthening capacities imply: identifying strengths and areas for improvement; facilitating the formulation of an institutional development plan (IDP) to build upon strengths and address the identified gaps; prioritizing IDP interventions; and monitoring progress and achievements.

Sharing of experiences, and active participation at the PANDRH (Pan American Network for Drug Regulatory Harmonization) to advocate for the strengthening of regulatory capacities, and to support identification the areas that require support are considered good practices in this area of work.

American Heart Association

- Social marketing campaign in the Caribbean to support salt reduction.
- Regional social marketing strategy for Latin America to support salt reduction.
- Mass campaigns on physical activity, breastfeeding and other topics in countries of the Region.
- Advocacy campaigns in support of adoption of public policies, e.g. excise tax on sugary drinks in Mexico, front of pack labelling in Chile.