NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO

Review of PAHO’s Collaboration with Inter-American and National NGOs in Official Relations

Introduction

1. With regard to PAHO’s official relations with non-governmental organizations, through Resolution CESS.R1 Revision of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations, the Special Session of the Executive Committee, held on 11 January 2007, established that one of the functions of the Subcommittee on Program, Budget, and Administration is to “review applications received and submit a recommendation for action by the Executive Committee. It will also periodically review collaboration with NGOs and make recommendations to the Executive Committee concerning renewal of such collaboration.”

Applications Received from Nongovernmental Organizations

2. According to section 4.3 of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations, the Subcommittee will review the application of one NGO, the Albert B. Sabin Vaccine Institute (SVI) which has made a request to be admitted into official relations with the Pan American Health Organization (PAHO).

3. Among SVI’s outstanding collaborators are the World Health Organization, the Bill and Melinda Gates Foundation and a number of international renowned universities, such as George Washington University (USA), the London School of Hygiene and
Tropical Medicine (UK) and the Institute of Parasitic Diseases at the Chinese Center for Disease Control and Prevention (China).

4. The work plan which has been presented by the SVI has been reviewed and discussed with the relevant technical area and the Pan American Sanitary Bureau has agreed that it will give important support to the first objective of PAHO’s Strategic Plan 2008-2012. This work plan mainly focuses on training and advocacy initiatives in the area of immunization and the introduction of new vaccines. It also incorporates activities that will provide the Bureau with much needed collaboration in neglected tropical diseases.

5. SVI was originally established in 1993 and has been working closely with PAHO since 2007. It is headquartered in Washington DC and the three focal areas for its research and program support are Vaccine Development, Vaccine Advocacy and Education and the Global Network for Neglected Tropical Diseases (NTD). Since 2007, PAHO and SVI have cooperated in a number of areas that have significantly improved health in the Americas, particularly in the areas of maternal and child health and NTD control.

6. Over the next four years, PAHO and SVI plan to continue to follow up on those activities that are currently underway. They include:

   • the Implementation of the Sub grant agreement between PAHO and SVI;
   • the Project on Improving Pertussis Surveillance in Latin America;
   • the Surveillance of human papillomavirus (HPV) related disease in Jamaica;
   • the production of articles and scholarly papers in collaboration with PAHO including funding of studies; and
   • the contribution toward the development of actions to combat neglected tropical diseases and other infectious diseases under the Gates/Sabin grant.

7. Among the proposed activities are:

   • the Colloquium on Sustained Immunization Financing in March 2011;
   • advocacy activities on Meningococcal Disease in Latin America, 2011–2012;
   • the Vaccinology Training Course for Latin American and Caribbean Expanded Program on Immunizations (LAC-EPI) Managers;
   • the meeting of the Advisory Committee on Practices, Participation and Training for Chairs of the Advisory Committee on Immunization Practices (ACIP) and LAC-EPI Managers, and the Vaccine Awareness Journalist Training Program in Latin America.
Renewal of Collaboration with Nongovernmental Organizations

8. The Subcommittee will also review collaboration with the InterAmerican Heart Foundation (IAHF) which has been in official relations with the Organization for the past eight years.

9. The IAHF was founded in 1995 and has been in official relations with PAHO since 2002. It is headquartered in Dallas, Texas, USA and its goal is to reduce heart diseases and stroke in Latin America and the Caribbean and to promote health through advocacy, education and research. The IAHF’s activities are mainly focused on research, education and training; advocacy and resource mobilization; the holding of conferences and produces publications, journals and other media for sensitizing the public about its work.

10. The IAHF has a large number of distinguished collaborators and these include the World Health Organization, Pan American Health Organization, World Bank, the American Heart Association, the Centers for Disease Control and Prevention of the USA, the Canadian Public Health Association, the Latin America Society of Hypertension (LASH) and the American Cancer Society.

11. In the past, PAHO and the IAHF have worked together in a number of areas. These include:

   • Conducting the Cardiovascular Risk factor Multiple Evaluations in Latin America Study (CARMELA Study) using the STEPS-Americas tools, conducting the Regional Committee on Surveillance convened by PAHO and conducting STEPS-America activities which contributed to cardiovascular (CVD) surveillance.
   • Support for the Global Youth Tobacco Survey (GYTS) to determine tobacco related behaviors, perceptions, attitudes and intentions among school students (13-15 years of age).
   • Support in NCD prevention, substantial progress has been made in Smoke-free Environments (SFE), research activities and publication of results.
   • Organizing the VitalAir Contests to recognize the work of the media in presenting tobacco related topics.

12. During the period 2011-2015, it is envisaged that PAHO and the IAHF will:

   • Collaborate in the preparation for the United Nations Non Communicable Disease Summit in September 2011. Activities include organizing and
facilitating actions by the Healthy Latin America Coalition (HLAC) and organizing a workshop to develop an advocacy plan.

- Support the implementation of the Framework Convention on Tobacco Control (FCTC) in Central America and hold a Latin American and Caribbean Tobacco Conference.
- Work on a cardiovascular disease plan for the Region and will support advocacy and communications regarding dietary salt reduction objectives regionally.

Progress Report

13. By 2011, the only NGO scheduled to be reviewed was the InterAmerican Heart Foundation which presented a report on results achieved in the period under review, and a draft collaborative workplan for the next four years, as set out in section 5.1 of the Principles.

14. According to Resolution CE144.R3, the Director is required to “submit an annual report on relations between PAHO and the nongovernmental organizations in official relations that would allow for the evaluation of the contribution of this collaboration to the strategic objectives defined by the Organization in the Strategic Plan” (see Annex A).

Proposals

15. A concise supplementary background document will be provided for the consideration of the Subcommittee and this will be discussed in a closed session. The document will include the following information:

(a) basic information on each NGO to be admitted or renewed;
(b) the report on collaboration over the past four years of each NGO to be renewed; and
(c) the program of work for the next four years.

16. Considering the date of the Subcommittee on Program, Budget, and Administration meeting and the time required to review the nongovernmental organizations in official relations with PAHO and to analyze the requests from those applying to be admitted, it is proposed that the SPBA consider an amendment to Section 4.3 of the Principles that would establish 31 December as the deadline for the submission of the necessary documents from the NGOs, instead of the end of January (see proposed Resolution at Annex B).
17. The Subcommittee is requested to consider the progress report on the status of the ongoing relations between PAHO and the nongovernmental organizations in official relations.

**Action by the Subcommittee on Program, Budget, and Administration**

18. The Subcommittee is requested to take note of the proposals made in paragraphs 15 to 17 and instruct the Pan American Sanitary Bureau accordingly.

Annexes
Progress Report on the Status of the Ongoing Relations between PAHO and the Nongovernmental Organizations in Official Relations with PAHO

EMBARQ, the World Resources Institute Center for Sustainable Transport

1. In 2010 and part of 2011, PAHO and EMBARQ have pursued two important activities. The first is an evaluation of the public health impact of a new integrated transportation system (ITS) in Arequipa, Peru. The objective is to conduct “before and after” evaluations to gauge the impact of ITS on air quality, physical activity and quality of life, and road safety. At this point, EMBARQ has already conducted the baseline evaluations, analyzed the data and are about to publish the results. In 2011, EMBARQ and PAHO will seek additional sources of funding to execute the post-evaluation of the ITS project by the end of this year. The second PAHO-EMBARQ activity is the regional contest “Active Cities, Healthy Cities,” held this year for the fourth time. This contest rewards cities for exemplary work in four categories: public transportation, road safety, physical activity, and public spaces. This year’s contest will be promoted through a social media platform developed specifically for this purpose, which will be launched at the end of February.

Latin American Federation of Clinical Biochemistry (COLABIOCLI)

2. In response to the growing number of diseases that pose a threat to public health in the Region and to the need for accurate and reliable laboratory testing in every country, COLABIOCLI organized a distance learning course on quality management systems and good laboratory practices as its main activity in 2010. Coordinated by the Fundación Bioquímica de Argentina (Biochemistry Foundation of Argentina), with the certification of the Facultad de Ciencias Químicas y Farmacia (Faculty of Chemical Science and Pharmacy) of Guatemala’s University of San Carlos, 200 participants from 19 countries were trained. The distance learning course was developed in close collaboration with PAHO/WHO’s Public Health Laboratory Services and is based on the second version of PAHO’s “Quality Management and Good Laboratory Practices” course. Participants graduating from the course will spread this knowledge throughout the Region, facilitating the review of national regulations for medical laboratories and their operational accomplishments in order to meet internationally recognized quality standards and improve patient care and surveillance.
National Alliance for Hispanic Health

3. The National Alliance for Hispanic Health has invited PAHO to be part of the National Hispanic Cardiology Leadership Network, formed in 2009 with the American College of Cardiology. At the network’s first meeting, PAHO presented the advances and challenges in the effort to promote cardiovascular health in the Americas and distributed materials on making the Americas trans fat free. During that meeting, PAHO joined the network’s international working group. The network operates through annual face-to-face meetings and working groups. The groups work on their plans in virtual meetings and report on their progress at the network’s annual meetings. During the network’s second meeting in 2010, PAHO was invited to present information and materials on the salt reduction initiative for the Americas. Through a subsequent agreement, in 2010 PAHO’s cardiovascular disease web page had a link to the National Alliance for Hispanic Health’s web page and vice versa. The working group on international efforts shared information on some of its members’ experiences in clinical work in Latin America. The possibility of offering internships through PAHO was discussed, and contacts were made with PAHO’s office for internships. The collaboration through the network has been productive and has the potential to grow in the future.

Inter-American College of Radiology (ICR)

4. The fruitful collaboration between PAHO and ICR continued at the national, regional, and global levels. Recent joint activities included a virtual course on oncoradiology for radiologists from Central America and the Dominican Republic; an assessment of radiology services in Trinidad and Tobago and Guyana; organization of the XXV Inter-American Congress of Radiology, held in Chile; ICR’s participation in the Regional Congress of the International Radiation Protection Association (IRPA), held in Colombia; ICR’s contribution to the development of a regional guide on appropriate prescription of diagnostic imaging examinations; and ICR’s participation in the meetings of the WHO Global Initiative on Radiation Safety in Health Care Settings and its contribution to the implementation of that initiative’s work plan. ICR also participated in the Consultation on the Role of WHO in Diagnostic Imaging and contributed to the review and co-sponsorship of the PAHO Guidelines for the Management and Use of Multipurpose Radiology.

Latin American Association of Pharmaceutical Industries (ALIFAR) and Latin American Federation of the Pharmaceutical Industry (FIFARMA)

5. The Latin American Association of Pharmaceutical Industries (ALIFAR) and the Latin American Federation of the Pharmaceutical Industry (FIFARMA) continue to support the Pan American Network for Drug Regulatory Harmonization (PANDRH), for which PAHO acts as Secretariat. PANDRH will hold its VI Conference in Brasilia in July.
2011. Each association supports the network through active working groups established to foster dialogue and contribute to the development of guides on regulatory issues in the area of medicines and biologicals. PANDRH, with the support of ALIFAR and FIFARMA, has published three technical guides that include standards for good pharmacovigilance practices, good laboratory practices, and vaccine registration requirements.

**Latin American Federation of Hospitals (FLH)**

6. The priority areas for collaboration in the PAHO-FLH work plan for 2008-2012 are improving the quality of health care, patient and health worker safety, the production and distribution of materials for training hospital staff, and joint research studies on health services to improve equity, quality, and efficiency in hospitals. During the 36th World Hospital Congress in 2009, PAHO participated in a pre-congress workshop offered by FLH entitled “The Vision of Health Systems in Latin America”. This forum addressed the accreditation of health services, and the integration of health and social services.

7. In keeping with the work plan, PAHO has also provided information and documentation on issues related to the development of health systems based on primary health care. Following up on the mandate to foster integrated health service delivery networks (Resolution CD49.R22), PAHO’s Health Systems Based on Primary Health Care Area will launch a new initiative entitled “Hospitals in Integrated Health Care Delivery Services” within a few months, and the FLH will be invited to play a key role in this new initiative.

**Pan American Federation of Associations of Medical Schools (PAFAMS)**

8. PAHO’s and FEPAFEM’s 2008–2012 joint work plan focuses on four main areas: (a) a continuation of the joint accreditation-certification effort (institutional and continuing professional development activities); (b) continued professional development through the activities of the Project Globe Consortium and the improvement of information technology in the health services; (c) implementation of the GlobalEduHealth pilot project for continuing medical education and continuing professional development in nonclinical settings; and (d) development of the database of the Centro de Información y Documentación en Educación Médica y Salud (Medical and Health Education Information and Documentation Center).

9. There has been limited communication between PAHO and FEPAFEM in the current biennium, and there is no active line of cooperation at this point. In the field of medical education, PAHO has invested its efforts in documenting innovative experiences in reorienting medical education towards primary health care, training trainers to bring
about changes in medical schools, and promoting accreditation as a way to strengthen a primary-health-care orientation. These advances will be shared with FEPAFEM to help identify joint action.

**Pan American Federation of Nursing Professionals (FEPPEN)**

10. Relations between PAHO and FEPPEN in the period 2008–2010 have been smooth and meaningful. The Federation provided a technical review and analysis of nurse migration in Latin America and contributed to the respective report, participated in the regional initiative on nursing regulation, and launched an initiative to promote the ILO Convention 149 on the working conditions of nurses. Activities on international recognition of certificates will begin in 2011. Through its national nursing associations the Federation is also actively participating in the design and implementation of nursing development plans in Central America; this effort will be expanded to other subregions. The Federation will also contribute to the translation of the WHO Guidelines for Implementing Strategic Directions for Strengthening Nursing and Midwifery Services in the African Region into Spanish and Portuguese and their dissemination. PAHO will strengthen its support and relations with FEPPEN and closely monitor the collaboration process.

**The American Society for Microbiology (ASM)**

11. The longstanding ASM-PAHO collaboration further increased in 2010. PAHO reported on joint activities and discussed future plans at the ASM International Board Meeting, held in San Diego, California, in May 2010.

12. Pursuant to the work plan, five activities were conducted in 2010.

- **Activity 1, ASM/PAHO fellowship and professorship program** - PAHO provided support for three fellowships to two students from Colombia and one student from Peru and three professorships to professors from the USA. PAHO participated in the review committee that selected the candidates.

- **Activity 2, providing expertise for workshops and meetings** – (a) ASM participated in the Annual Meeting of the Laboratory Network for Monitoring Antimicrobial Resistance (Costa Rica, December 2010). (b) A PAHO/ASM workshop on how to write scientific papers was held immediately after this meeting. An ASM facilitator presented an abridged version of the ASM’s Education Board’s course on Scientific Writing and Publishing. (c) PAHO invited an expert from ASM to participate in the mission to Trinidad and Tobago to assess that country’s microbiology laboratory capacity.
• **Activity 3 training for surveillance networks** - ASM and PAHO will jointly revise the Antimicrobial Susceptibility Testing Manual.

• **Activity 4, collaborate with PAHO’s malaria program** - ASM contacted the malaria program to follow up on initial conversations on malaria laboratories in the Region.

• **Activity 5, collaborate with PAHO’s tuberculosis program** - ASM contacted the tuberculosis program to discuss strengthening Guyana’s laboratory capacity.

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

13. Collaborative activities with AIDIS included the preparation of the “Manual of Water and Sanitation and Vulnerabilities for Central America” and a workshop for validating the manual. A document incorporating experts’ contributions to the manual has been drafted and was delivered to PAHO on 15 December 2010. PAHO also worked with AIDIS on developing and holding a symposium on “Water, Cities, and Health: For a New Water Culture,” and assisted in the preparations for AIDIS’ XXXII Congress” (held in the Dominican Republic in November 2010). Plans for 2011 include working on the second phase of the manual “Reducing Vulnerabilities of Drinking Water and Sanitation Systems in Central America – Risk Management Manual” and holding a workshop for six Central American countries to train trainers. Also planned for 2011 is a pre-assessment of the water and sanitation situation in Haiti. AIDIS has made an initial visit to Port-au-Prince and it is preparing to return there to gather data that will enable it to put together provisional reports on water supply and solid and liquid waste disposal.

### Latin American and Caribbean Women’s Health Network (LACWHN)

14. The Latin American and Caribbean Women’s Health Network (LACWHN) has consistently contributed toward the implementation of activities found in the LACWHN/PAHO Plan of Action 2009–2014 aimed at implementation of the PAHO Gender Equality Policy. The Plan of Action’s relevant communication issues have been addressed through LACWHN’s Itinerant University and its *Women’s Health Journal*. The Network has fought to the inclusion of issues related to universal access and comprehensive health care for women in the “Brasilia Consensus,” a document issued at the XI Regional Conference of Women in Latin America and the Caribbean. Chile’s Gender Equity Observatory has made it possible to use information to empower civil society to monitor health policies. This achievement was presented as a good practice during the global consultation on gender and health statistics organized by WHO. The Network has also helped to prepare a proposal for integrating a gender equality perspective into the analysis of the global student health survey, which will be considered for the next round of the survey.
15. The International Diabetes Federation (IDF) has been in official relations with PAHO since 1996. In the intervening years, PAHO and IDF have collaborated on a variety of technical issues pertaining to diabetes care and education. The Federation’s collaboration with PAHO is carried out throughout IDF’s SACA (South America-Central America) and NAC (North America-the Caribbean) regional councils. At the country level, IDF member associations participated in PAHO projects for the improvement of diabetes care. At the regional and global levels, PAHO and IDF collaborated in the Diabetes Summit that was held in Brazil in 2009 and organized in partnership with the World Diabetes Foundation. The diabetes education curriculum at the University of the West Indies is an example of the effective collaboration between PAHO and IDF. IDF participates globally, regionally, and locally in the preparation of the September 2011 United Nations Summit on Chronic Diseases and in the development of the Partners Forum for Action on Chronic Diseases and Promotion of Healthy Lifestyles.

March of Dimes

16. Since 1999 the March of Dimes has been a PAHO strategic partner in support of the regional initiative to eliminate rubella and congenital rubella syndrome (CRS) by 2010. This collaboration has allowed PAHO to increase technical cooperation to ministries of health in the coordination, implementation, and supervision of rubella immunization activities throughout the Region, including the promotion of the incorporation of the rubella vaccine into regional and global measles control programs. Today, members of the March of Dimes continue to participate in expert discussions related to this regional initiative.

17. The PAHO-March of Dimes 2009–2013 work plan focuses on three issues: education on perinatal health in the Americas, pre-term birth, and developing a global perinatal health network. A meeting was held in 2009 between the March of Dimes and PAHO’s designated focal point, the Latin American Center for Perinatology and Women’s Reproductive Health (CLAP/WR). At that time, CLAP/WR presented its strategy for capacity building through pre-service and in-service education, which is aimed at achieving Millennium Development Goals 4 and 5. The Center also highlighted the maternal and child health surveillance system, which relies on the perinatal information system as a basic tool kit. Use of this system standardizes data collection to enhance individual patient care and facilitates comparison among networks of institutions. The March of Dimes also presented its strategies related to family and community health, which are based on the development of a culture of youth volunteer activities and parent-patient partnerships to foster the political will to address maternal...
and child health issues. Financial constraints have limited progress on the work plan to date.

**U.S. Pharmacopeia (USP)**

18. The United States Pharmacopeia continues to support the development of the PAHO work program in medicines and health technologies. To this end, it supports the strengthening of official medicines control laboratories through PAHO’s external quality program and the strengthening of these laboratories throughout the Region. With the support of USP, three official medicines control laboratories in the Region (Bolivia, Peru, and Uruguay) were prequalified by PAHO/WHO in 2010.

**World Association for Sexual Health (formerly called the World Association for Sexology)**

19. The collaboration between PAHO and the World Association for Sexual Health (WAS) has continued to be fruitful. The Association has collaborated with PAHO to produce materials and documents to train health care providers in the field of sexual health. PAHO has supported the translation and printing of the WAS document “Sexual Health for the Millennium.” PAHO also has been invited to serve on the scientific committee for the International Conference on Sexual Health scheduled for August 2011 in Glasgow, Scotland. Joint projects on sexual diversity in Latin America are on hold due to financial constraints, but joint collaboration continues in the training of human resources and the follow-up of the Mexico City Ministerial Declaration, “Educating to Prevent,” on comprehensive sexuality education as a means of halting the spread of HIV.
### SCHEDULE OF SPBA REVIEWS OF NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO

(as of 18 January 2011)

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* A review of the records last year found that the activities of the InterAmerican Heart Foundation (IAHF) had not been examined since its entry into official relations with PAHO. Permission was requested at the 146th Session of the Executive Committee to review the IAHF in 2011.
PROPOSED RESOLUTION

AMENDMENT OF THE PRINCIPLES GOVERNING RELATIONS BETWEEN THE PAN AMERICAN HEALTH ORGANIZATION AND NONGOVERNMENTAL ORGANIZATIONS

THE 148th SESSION OF THE EXECUTIVE COMMITTEE,

Taking into account Resolution CE138.R12 that establishes the Subcommittee on Program, Budget, and Administration, which includes among its functions the responsibility for the process of admittance and assessment of nongovernmental organizations in official relations with PAHO, undertaken annually;

Mindful of Resolution CESS.R1 on the “Revision of the Principles Governing Relations Between The Pan American Health Organization and Nongovernmental Organizations”, approved by the Special Session of the Executive Committee in 2007;

Considering that the Subcommittee on Program, Budget, and Administration is held in March and in view of the time required to review the nongovernmental organizations in official relations with PAHO and to analyze the requests from those applying to be admitted into official relations with PAHO,

RESOLVES:

1. To approve an amendment to Section 4.3 of the Principles to establish December 31 as the deadline for the submission of the relevant documentation from the nongovernmental organizations.

Annex
PRINCIPLES GOVERNING RELATIONS BETWEEN
THE PAN AMERICAN HEALTH ORGANIZATION AND
NONGOVERNMENTAL ORGANIZATIONS

Suggested modification of Section 4.3:

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Applications from NGOs, made voluntarily or by invitation, should reach PAHO headquarters not later than the end of January in order to be considered by the Subcommittee on Program, Budget, and Administration in March and approved by the Executive Committee in June of the same year.

Applications from NGOs, made voluntarily or by invitation, should reach PAHO headquarters not later than the end of January 31 December in order to be considered by the Subcommittee on Program, Budget, and Administration in March and approved by the Executive Committee in June of the same year.

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* Principles adopted by Resolution CESS.R1 (2007)