Introduction

1. To address official relations between the Pan American Health Organization (PAHO) and nongovernmental organizations (NGOs), Resolution CESS.R1, Revision of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations, of 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 (SPBA) 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 of NGOs for Admittance into Official Relations with PAHO

2. This year, the Director received applications from two NGOs, the Healthy Caribbean Coalition and the Inter-American Society of Cardiology. Each is requesting admittance into official relations with PAHO for a period of four years.

Review of the NGOs in Official Relations with PAHO

3. Section 5 of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations states, “The Subcommittee on Program, Budget, and Administration will normally review collaboration with each NGO with which PAHO has official working relations every four years and, based on the results of the biennial work plans and activities undertaken during the period under review and on
the proposed work plan for the next four-year period, shall make a recommendation to the Executive Committee on the desirability of maintaining these relations.”

4. The Director submitted a report to the Subcommittee on Program, Budget, and Administration (SPBA) on six inter-American nongovernmental organizations whose relations with PAHO were due for the four-year review. The NGOs in question included the Inter-American College of Radiology (ICR), the Latin American Association of Pharmaceutical Industries (ALIFAR), the Latin American Federation of Hospitals (FLH), the Pan American Federation of Associations of Medical Schools (FEPAFEM), the Pan American Federation of Nursing Professionals (FEPPEN), and the Latin American and Caribbean Women’s Health Network (LACWHN).

5. The information submitted by the NGOs in support of their applications for admittance or for continuing their official formal relations was made available to the members of the Subcommittee in a background document.

6. The Executive Committee in June 2009 asked the Director to provide a brief progress report on nongovernmental organizations in official relations with PAHO. Annex A includes a progress report on the status of ongoing relations between PAHO and those NGOs not being reviewed at this time.

7. The SPBA, composed of the Delegates of Argentina, Costa Rica, El Salvador, Guyana, Saint Vincent and the Grenadines, the United States of America, and the Bolivarian Republic of Venezuela, considered the background papers prepared by the Bureau. These background papers contained a profile of the NGOs in official relations with PAHO and a report on their collaborative activities with PAHO. It also contained the proposals and work plans of the new NGOs requesting admission into official relations with PAHO, with a recommendation by the PAHO technical focal point.

8. Regarding the Healthy Caribbean Coalition and the Inter-American Society of Cardiology, the Subcommittee recommends that the Executive Committee admit these two NGOs into official relations with PAHO for a period of four years, through 2016.

9. Concerning the NGOs being reviewed on a periodic basis—the Inter-American College of Radiology (ICR), the Latin American Association of Pharmaceutical Industries (ALIFAR), the Latin American Federation of Hospitals (FLH), the Pan American Federation of Associations of Medical Schools (FEPAFEM), the Pan American Federation of Nursing Professionals (FEPPEN), and the Latin American and Caribbean Women’s Health Network (LACWHN)—the Subcommittee recommends to the Executive Committee that official relations with these nongovernmental organizations be maintained through 2016.
10. The SPBA decided to recommend that the Bureau contact the Inter-American College of Radiology regarding the need to strengthen communication between ICR and corresponding PAHO technical entities.

**Action by the Executive Committee**

11. After reviewing the information provided, the Committee is invited to consider adopting the proposed resolution recommended by the Sixth Session of the Subcommittee on Program, Budget, and Administration and presented in Annex B.

Annexes
PROGRESS REPORT ON THE STATUS OF ONGOING RELATIONS BETWEEN PAHO AND THE NONGOVERNMENTAL ORGANIZATIONS IN OFFICIAL RELATIONS WITH PAHO¹

World Resources Institute Center for Sustainable Transport (EMBARQ)

1. In 2011, EMBARQ undertook projects to study, promote, and deepen the connection between public health and sustainable urban transport in the Americas. First, it continued its evaluation of the public health impact of the System of Integrated Transport under construction in Arequipa, Peru. EMBARQ completed a report on prior conditions related to road fatalities and injuries, physical activity levels of residents, and exposure to air pollution. After implementation, an ex-post study will be completed to measure these same factors city-wide, as well as on a new bus rapid transit corridor. EMBARQ held an event with PAHO, the Peruvian Vice Minister of Health, and the Mayor of Arequipa in October 2011 to provide the key findings of this first report. It led to encouraging signs from officials in terms of working toward improving the city’s public health through more sustainable transport and public spaces that reduce the role of vehicles and promote mass transport, biking, and walking.

2. Second, EMBARQ successfully concluded the fourth regional “Active Cities, Health Cities” contest, which rewards cities for exemplary work in four categories: public transport, road safety, physical activity, and public spaces. The contest was conducted through a social media platform and website that saw more than 100 submissions from Argentina, Bolivia, Brazil, Chile, Colombia, Costa Rica, Cuba, Ecuador, El Salvador, Guatemala, Haiti, Honduras, Mexico, Nicaragua, Panama, Paraguay, Peru, Uruguay, and Venezuela. Winners from Argentina, Brazil, Colombia and Mexico, were brought together for an awards ceremony that concluded the final plenary session of the 7th International Congress on Sustainable Transport in Mexico City in October.

3. Third, EMBARQ has been working with PAHO Headquarters on a traffic accident data collection system. Those actively collaborating on the project include the municipalities of Lima and Arequipa, the Ministry of Health, the Office of the Attorney General, and law enforcement officials. Lastly, EMBARQ has continued to work with PAHO on other matters regarding health and transport, including attending a two-day meeting of technical experts on motorcycle injuries in the Americas; meeting with key PAHO staff; and attending and speaking at events such as the launch of the “Decade of

¹ Does not include the nongovernmental organizations (NGOs) under review. The comprehensive information of the NGOs under consideration was reviewed by the Subcommittee on Program, Budget, and Administration.
Action” on road safety in Mexico and Brazil in conjunction with PAHO officials. EMBARQ has completed these activities through its Latin American health and road safety programs and its centers: EMBARQ Andino based in Arequipa, Peru; EMBARQ Brazil, based in Porto Alegre; and EMBARQ Mexico in Mexico City.

Latin American Federation of Clinical Biochemistry (COLABIOCLI)

4. The mission of COLABIOCLI is the continuous improvement of ethical and scientific aspects of the clinical biochemistry profession. The main objective is to establish continuous quality assurance systems in all laboratories in Latin America, with the cooperation of PAHO/WHO, the national societies of clinical chemists, Ministries of Public Health, and university authorities in Latin America. It is the practice of COLABIOCLI to visit ministers of health, university authorities, and national health programs in order to strengthen laboratory professional staff and laboratory activities as part of a program suggested by COLABIOCLI or by local organizations. 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 and 2011. The course was coordinated by the Biochemistry Foundation of Argentina (Fundación Bioquímica de Argentina), with the certification of the Faculty of Chemical Science and Pharmacy (Facultad de Ciencias Químicas y Farmacia) of Guatemala’s University of San Carlos. Two hundred participants from 19 countries were trained in 2010 and 210 participants in 2011. 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 Managements and Good Laboratory Practices course (Curso de Gestión de Calidad y Buenas Prácticas de Laboratorio, 2009). Participants graduating from the course will spread that 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 (NAHH)

5. The National Alliance for Hispanic Health participated in the start-up activities of the Pan American Forum against NCDs and in the preparatory process and consultation for the High-level Meeting on the Prevention and Control of Non-Communicable Diseases. NAHH continued its efforts to promote health in Hispanic communities across the United States, produced health promotion and educational materials for Hispanic health consumers and healthcare providers, and expanded its network of Hispanic health professionals and healthcare providers serving Hispanic communities. Since 2010,
PAHO’s NCD web page has had a link to the NAHH web page. The collaboration through the network has the potential to grow in the future.

**Latin American Federation of the Pharmaceutical Industry (FIFARMA)**

6. The Latin American Federation of the Pharmaceutical Industry continues to support the Pan American Network for Drug Regulatory Harmonization (PANDRH), for which PAHO acts as Secretariat. PANDRH held its VI Pan American Drug Regulatory Harmonization Conference in Brasilia in July 2011. FIFARMA 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 FIFARMA, has published three technical guides that include standards for good pharmaceutical vigilance and laboratory practices as well as for vaccine registration requirements. FIFARMA provided technical and financial support to the successful organization of the above-mentioned conference in Brazil in July 2011. More than 300 participants from national regulatory agencies, academia, nongovernmental organizations, civil society, and the pharmaceutical industry attended the conference.

**American Society for Microbiology (ASM)**

7. The American Society for Microbiology and PAHO have been actively collaborating on initiatives as outlined in the 2009-2012 work plan. These efforts include the annual awarding of the ASM/PAHO Infectious Diseases Epidemiology and Surveillance Fellowship and Professorship Program in cooperation with the Laboratory Services and Communicable Diseases Units during 2009-2011. The implementation of the 2012 Fellowship and Professorship Program is pending the approval of annual funding from PAHO. ASM and PAHO have also been collaborating on lab strengthening efforts funded by CDC-PEPFAR in Guyana and Haiti since 2009 and 2008, respectively. In addition, ASM has provided experts to assist PAHO on initiatives in the Americas. ASM identified member David Bruckner of the UCLA Medical Center to serve as a microbiology expert for the PAHO assessment visit to Trinidad and Tobago in December 2010. Also that month, ASM member Larry McDaniel of the University of Mississippi Medical Center led a Scientific Writing and Publishing Workshop in conjunction with the Annual Meeting of the Antimicrobial Resistance and Surveillance Unit of PAHO in Costa Rica. ASM developed a proposal to expand this concept; this initiative, as well as a Grant Writing Workshop, is pending funding availability.

8. ASM was also an active participant in the PAHO-sponsored World Health Day in April 2011, the TB Laboratory Working Group of the Americas in San Salvador, El Salvador in December 2010, the PAHO-sponsored TB Partners Meeting in Port-au-Prince, Haiti in October 2010, and the PAHO/USAID-sponsored Technical Advisory
Group Meeting on Antimicrobial Resistance in Washington, D.C. in September 2010. ASM looks forward to further cooperation with PAHO to implement these valuable joint programs. To this end, ASM would like to further discuss with PAHO key regional meetings for possible ASM participation and PAHO contributors for the revised edition of the Antimicrobial Susceptibility Testing Manual.

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

9. PAHO’s collaborative activities with AIDIS included the preparation of a handbook on vulnerabilities in Central America and appropriate mitigation measures. PAHO also collaborated with AIDIS in the development of the 32nd AIDIS Congress, which had as its theme “water, cities, and health for a new water culture.” Plans for 2012 include work on the second phase of a manual on reduction of vulnerabilities in the water supply and sanitation systems in Central America (risk management manual) and the holding of a workshop for six Central American countries aimed at training trainers. A preliminary assessment of the water and sanitation situation in Haiti is also planned for 2012. AIDIS made an initial visit to Port-au-Prince and is preparing to return to collect data that will allow it to prepare interim reports on water and the disposal of solid waste and liquids. AIDIS and PAHO plan to jointly organize the 33rd AIDIS Congress to be held in June 2012 in Salvador, Bahia, Brazil, as well as a parallel event to the “Rio+20” conference in Rio de Janeiro in June 2012.

**International Diabetes Federation (IDF)**

10. The International Diabetes Federation has been in official relations with PAHO since 1996. During the past year, IDF’s collaboration with PAHO/WHO included advocacy, education, and the diabetes program. The advocacy work was developed in preparation for the United Nations High-level Meeting (UN HLM) on Noncommunicable Diseases in September 2011 and was used during the event itself. IDF played an important role producing documents prior to the meeting, highlighting the importance of the burden of chronic diseases and diabetes. During the UN HLM, IDF contributed by organizing highly important activities involving different players such as academia, government, and people affected by diabetes. At the regional level, IDF collaborated with PAHO in the implementation of projects focused on diabetes education and the improvement of the quality of diabetes care; the lay diabetes education project of the Diabetes Association of Jamaica; and the Internet-based education programs for patients and health professionals in Chile, Cuba, and Mexico. These all are good examples of the successful collaboration between IDF and PAHO. Furthermore, at the country level, PAHO collaborated strongly with associations enhancing the visibility of diabetes and chronic disease and improving diabetes care at the local level in many countries such as Anguilla, Antigua, Brazil, Chile, Colombia, Cuba, Grenada, Jamaica, Mexico, Nicaragua, Paraguay, Saint Lucia, and many others.
March of Dimes

11. March of Dimes has been involved in different activities in the region. It has participated in different meetings related to nutrition, birth defects, and perinatal health, including the Awareness Project, Latin America Task Force Meeting (Brasilia, August 2011), the 5th Regional Meeting of the Central American Micronutrient Food Fortification Initiative, the First Annual Meeting of the CORMAF Regional Commission on Micronutrients and Fortified Foods for Central America and the Dominican Republic, and a workshop to introduce the Regional Birth Defects Surveillance System in Guatemala in October 2011. The activities involved providing technical cooperation and expertise at the regional, sub regional and national levels. Potential activities to be developed jointly with PAHO during 2012 have also been discussed.

Sabin Vaccine Institute (SVI)

12. The Sabin Vaccine Institute continues to support the development of the PAHO-SVI work plan focused on training and advocacy initiatives concerning immunization and the introduction of new vaccines in the Region of the Americas. Ongoing PAHO-SVI activities include improving pertussis surveillance in Latin America to guide prevention and control strategies, and carrying out a meningococcal disease study in Latin America to compile regional disease burden information. PAHO continues to coordinate and carry out human papillomavirus surveillance in Jamaica with SVI support. PAHO representatives participated in SVI’s Colloquium on Sustainable Immunization Financing in Addis Ababa, Ethiopia on 28-29 March 2011. The PASB Deputy Director, moderated a session concerning the evolution of immunization financing in the Region of the Americas. In partnership with PAHO, SVI convened a Vaccine Awareness Journalist Information session in Lima, Peru on 14-15 April 2011, with the attendance of 30 journalists from 17 countries in the Americas. Together with PAHO, SVI held an ancillary meeting in conjunction with the meeting of the Advisory Committee on Practices, Participation and Training for Chairs of the Advisory Committee on Immunization Practices. Five delegates from four Latin American countries attended the meeting on 22-23 June 2011 in Atlanta, Georgia. A Vaccinology Training Course was held from 12-16 December 2011 in Lima, Peru. This course provided training for over 50 participants from the Americas. Furthermore, SVI continues to publish articles and scholarly papers in collaboration with PAHO.

13. The Global Network for Neglected Tropical Diseases, one of SVI’s advocacy and resource mobilization programs, works with PAHO to support the development of advocacy and awareness of neglected infectious diseases (NIDs) at the regional level. Activities supported under this partnership include disease mapping processes and promotion of the development of national plans of action for NIDs as a framework to
reach control and elimination goals in Latin America and the Caribbean. As part of this partnership, PAHO has advanced the development of integrated plans of action in priority countries; mapped and remapped at the national and municipality level; integrated NIDs with inter-programmatic and intersectoral activities; advocated to Ministries of Health and other ministries to address the social determinants of NIDs; raised awareness among donors about the regional burden of NIDs; and promoted social mobilization and community participation for NID program activities.

**United States Pharmacopeia (USP)**

14. In 2011, the United States Pharmacopeia continued to support implementation of its collaborative work with PAHO to advance a number of activities that promote access to quality and safe medicines for the benefit of patients and practitioners in the Americas. This included noteworthy work on the External Quality Control Program, the Pan American Network for Drug Regulatory Harmonization, USP standards-related support, and the Promoting the Quality of Medicines Program implemented by USP for the U.S. Agency for International Development. A more detailed one-page report was provided with a list of specific activities undertaken with PAHO according its collaborative work plan and the lines of work mentioned.

**World Association for Sexual Health (WAS—formerly the World Association for Sexology)**

15. PAHO and the World Association for Sexual Health collaborated throughout 2011 and carried out the following joint activities according to our work plan:

(a) A training workshop on Female Sexual Work and Prevention was held in San Salvador, El Salvador on 17-19 May 2011. The workshop was attended by more than 30 health providers and sexual workers who tested and used the manual that previously had been developed by WAS and PAHO and facilitated by two WAS professionals. The evaluation showed a high degree of satisfaction among participants in the workshop as well as a significant increase in the knowledge necessary for health providers to address the needs of sexual workers, and in the intention of sex workers to adopt health prevention behaviors. The participants recommended extending this workshop to other geographic regions.

(b) PAHO and WAS participated and were major players in the Consultation on Scientifically-based Sexuality Education held in Madrid, Spain on June 20-21, 2011 and in the subsequent review and finalizing of a Consensus Document to be used by all the Latin American region. This document was translated into English by PAHO and reviewed by WAS for its final version.
(c) WAS participated in the recent Technical Consultation for the Provision of Comprehensive Care to Transgender and Transsexual Persons and their Communities in Latin America and the Caribbean held in Washington D.C., 19-21 December. WAS participated by offering suggestions in an earlier review of the document. WAS also helped facilitate the consultation process and will take part in the ensuing review and finalization of the document and subsequent activities.

### Schedule of SPBA Reviews of Nongovernmental Organizations in Official Relations with PAHO
(as of 27 March 2012)

<table>
<thead>
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<th>Name</th>
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PROPOSED RESOLUTION

NONGOVERNMENTAL ORGANIZATIONS
IN OFFICIAL RELATIONS WITH PAHO

THE 150th SESSION OF THE EXECUTIVE COMMITTEE,

Having considered the report of the Subcommittee on Program, Budget, and Administration, Nongovernmental Organizations in Official Relations with PAHO (Document CE150/6);

Mindful of the provisions of the Principles Governing Relations between the Pan American Health Organization and Nongovernmental Organizations,

RESOLVES:

1. To renew official relations between PAHO and the following nongovernmental organizations for a period of four years:

   (a) the Inter-American College of Radiology (ICR);
   (b) the Latin American Association of Pharmaceutical Industries (ALIFAR);
   (c) the Latin American Federation of Hospitals (FLH);
   (d) the Pan American Federation of Associations of Medical Schools (FEPAFEM);
   (e) the Pan American Federation of Nursing Professionals (FEPPEN), and
   (f) the Latin American and Caribbean Women’s Health Network (LACWHN).
2. To admit the following nongovernmental organizations into official relations with PAHO for a period of four years:

(a) the Healthy Caribbean Coalition, and
(b) the Inter-American Society of Cardiology.

3. To take note of the Progress Report on the status of relations between PAHO and NGOs.

4. To request the Director to:

(a) advise the respective nongovernmental organizations of the decisions taken by the Executive Committee;
(b) continue developing dynamic working relations with inter-American NGOs of interest to the Organization in areas which fall within the program priorities that the Governing Bodies have adopted for PAHO; and
(c) continue fostering relationships between Member States and NGOs working in the field of health.
Report on the Financial and Administrative Implications for the Secretariat of the Proposed Resolution

1. **Agenda item: 3.3: Nongovernmental Organizations in Official Relations with PAHO.**

2. **Linkage to Program Budget 2012-2013:**

   This resolution proposes continuing official relations with six nongovernmental organizations (NGOs) whose collaborative relationship was reviewed. It furthermore proposes establishing official relations with two new nongovernmental organizations. All its collaborative work plans should be linked to one of the work areas or strategic objectives of the Strategic Plan of PAHO. Specific references to the 16 strategic objectives follow:

   **Re: Healthy Caribbean Coalition (HCC) and the Inter-American Society of Cardiology (SIAC)**

   (a) **Area of work:** Health Surveillance and Disease Prevention and Control/Chronic Disease Prevention and Control (HSD/NC), Cardiovascular Health

   (b) **Expected result:** HCC and SIAC will collaborate with PAHO to promote the implementation of United Nations Political Declaration on NCDs across the Region, particularly to implement the agenda for the prevention and control of cardiovascular diseases with emphasis on hypertension, coronary heart disease and stroke, which are the leading causes of death in most countries of the Region.

   **Re: Inter-American College of Radiology (ICR)**

   (a) **Area of work:** Health Systems based on Primary Health Care/Medical and Health Technologies (HSS/MT), Radiology

   (b) **Expected result:** ICR will collaborate with PAHO in implementing strategic objective 12 on the proper use of health technologies (diagnostic imaging). Joint ICR/PAHO collaboration will focus on disseminating and implementing the “Recommended Correct Prescription of Diagnostics Imaging Examinations” throughout the Region and to elaborate/update the census of human resources and technology of diagnostic imaging.

   **Re: The Latin American Federation of Hospitals**

   (a) **Area of work:** Health Systems based on Primary Health Care, Hospital and Integrated Health Care Delivery

   (b) **Expected result:** Contribute to the achievement of Strategic Objective 10.
Re: Pan American Federation of Nursing Professionals (FEPPEN)

(a) **Area of work:** Health Systems based on Primary Health Care/Human Resources for Health (HSS/HR)

(b) **Expected result:** Contribute to the achievement of Strategic Objective 13 (OSER 13.4)

Re: Latin American and Caribbean Women’s Health Network

(a) **Area of work:** Gender, Diversity, and Human Rights. The Latin American and Caribbean Women’s Health Network (LACWHN) will assist PAHO in implementing Strategic Objective 7.

(b) **Expected Result:** Over the next four years, 2012-2016, LACWHN will continue collaborating in implementing the Plan of Action of the PAHO Gender Equality Policy through promoting generation, analysis and use of statistics and information based on gender, equity and health; supporting the Observatory on Gender and Health in Chile at the national level by providing inputs to research topics (to be determined) in order to analyze and search for the causes of inequities in health; training leaders in advocacy and monitoring with the aim of incorporating gender equality in public policy through their local governments and national.

3. **Financial implications:**

Re: Inter-American Society of Cardiology

(a) **Total estimated cost for implementation over the lifecycle of the resolution (estimated to the nearest US$ 10,000, including staff and activities):**

   Approximately $10,000.

(b) **Estimated cost for the biennium 2012−2013 (estimated to the nearest US$ 10,000, including staff and activities):**

   Not applicable.

(c) **(Of the estimated cost noted in (b), what can be subsumed under existing programmed activities?)**

   Not applicable.

Re: The Latin American Federation of Hospitals:

(a) **Total estimated cost for implementation over the lifecycle of the resolution (estimated to the nearest US$ 10,000, including staff and activities):**

   Approximately $20,000.

(b) **Estimated cost for the biennium 2012−2013 (estimated to the nearest US$ 10,000, including staff and activities):**

   Not applicable.
(c) Of the estimated cost noted in (b), what can be subsumed under existing programmed activities?
   Not applicable.

4. Administrative implications
   (a) Indicate the levels of the Organization at which the work will be undertaken:
       Regional, subregional, and country levels.
   (b) Additional staffing requirements (indicate additional required staff full-time equivalents, noting necessary skills profile):
       The collaborative work plans are based on PAHO’s current staffing.
   (c) Time frames (indicate broad time frames for the implementation and evaluation):
       Four years.
ANALYTICAL FORM TO LINK AGENDA ITEM WITH ORGANIZATIONAL MANDATES

1. **Agenda item:** 3.3: Nongovernmental Organizations in Official Relations with PAHO.

2. **Overall Responsible unit:** Area of External Relations, Resource Mobilization and Partnerships

3. **Overall Preparing officer:** James Hill, with the following PAHO technical focal points
   - Re: Latin American Association of Pharmaceutical Industries (ALIFAR): James Fitzgerald, Health Systems based on Primary Health Care/Medicines and Health Technologies (HSS/MT)
   - Re: Inter-American Society of Cardiology (SIAC): Pedro Ordunez, Health Surveillance and Disease Prevention and Control/Chronic Disease Prevention and Control (HSD/NC)
   - Re: Healthy Caribbean Coalition (HCC): James Hospedales, Health Surveillance and Disease Prevention and Control/Chronic Disease Prevention and Control (HSD/NC)
   - Re: Latin American and Caribbean Women’s Health Network (LACWHN): Lilian Jara, Gender, Diversity, and Human Rights (GDR)
   - Re: The Latin American Federation of Hospitals: Reynaldo Holder, Health Systems based on Primary Health Care/Integrated Services (HSS/IS)
   - Re: Pan American Federation of Nursing Professionals (FEPPEN): Silvina Malvarez, Health Systems based on Primary Health Care/Human Resources for Health (HSS/HR)
   - Re: Pan American Federation of Associations of Medical Schools (FEPAFEM): Rosa Maria Borrell, Health Systems based on Primary Health Care/Human Resources for Health (HSS/HR)

4. **List of collaborating centers and national institutions linked to this Agenda item:**
   Not applicable.

5. **Link between Agenda item and Health Agenda for the Americas 2008-2017:**
   - Re: Healthy Caribbean Coalition and Inter-American Society of Cardiology:
     These two new NGOs, would enable PAHO to carry out its technical cooperation under the following line of action:
     - Reducing the risk and burden of disease (Healthy Caribbean Coalition and the Inter-American Society of Cardiology).
   - Re: FEPPEN:
     Strengthening human resources in health management.
6. **Link between Agenda item and Strategic Plan 2008–2012:**

Re: Inter-American Society of Cardiology:

- Tackling Health Determinants. The actions required to tackle most of these determinants are outside the mandate of Ministries of Health and require the involvement of other governmental entities. Consequently, the National Health Authority should expand the arena for public health activities by promoting healthy public policies via inter-institutional consensus–building and intersectoral collaboration.

- Reducing the Risk and Burden of Disease. Specific actions should be initiated or strengthened to control diabetes, cardiovascular and cerebrovascular diseases, and types of cancer with the greatest incidence, as well as hypertension, dyslipidemia, obesity, and physical inactivity.

- SIAC will assist PAHO in implementing Strategic Objective 3: To prevent and reduce disease, disability and premature death from chronic non-communicable conditions, mental disorders, violence and injuries.

This collaborative plan of action will also serve to help PAHO implement Strategic Objective 1: To reduce the health, social and economic burden of communicable diseases.

Re: The Latin American Federation of Hospitals:

Increasing social protection and access to quality of health services.

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

Gender, Diversity and Human Rights technical staff have reviewed the work plan presented by the LACWHN, and concluded that it reflects one of the PAHO priorities under Strategic Objective 7 of the Strategic Plan 2008-2012. Over the next four years, the LACWHN will continue disseminating relevant information on gender and health; PAHO and LACWHN will work on organizing the Itinerant University in Honduras; and in addition, the LACWHN as member of the Technical Advisory Group on Gender Equality for the PAHO’s Director, will continue contributing in the process of implementing and evaluating the Plan of Action of the PAHO Gender Equality Policy.

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

Re: FEPPEN:

Contribution of FEPPEN to the report and publication of the Analysis of Nursing Regulation in Latin America.
8. **Financial implications of this Agenda item:**

The collaborative work plans of most these NGOs in official relations with PAHO are financed by the approved budget of the relevant technical areas or by the NGOs’ budgets; there are no financial implications beyond the approved Biennial Work Plan in excess of $10,000. The exception to this is as follows:

- **Latin American Federation of Hospitals:** $20,000.