PAHO/WHO COLLABORATING CENTERS

Background

1. According to the definition given by the World Health Organization (WHO): “A WHO Collaborating Centre is an institution designated by the Director-General to form part of an international collaborative network carrying out activities in support of the Organization’s program…” (1).

2. For historical reasons specific to the Pan American Health Organization (PAHO), WHO collaborating centres located in the Region of the Americas are known as PAHO/WHO collaborating centers.

3. To be designated as a WHO Collaborating Centre, institutions must meet all of the following criteria: a) high scientific and technical standing at national and international levels; b) prominent place in the country's health, scientific, or educational structures; c) high-quality of scientific and technical leadership, and sufficient number of staff with high-level qualifications; d) stability in terms of personnel, activity and funding; e) strong working relationship with other institutions in the country, and at intercountry, regional, and global levels; f) clear ability, capacity and readiness to contribute, both individually and within networks, to WHO program activities, whether in support of country programs or through participation in international cooperative activities; g) clear technical and geographical relevance of both the institution and its activities to WHO's program priorities; and h) at least two years of previous collaboration with WHO in carrying out jointly planned activities (2). All designation processes include consultation with the health authorities of the respective countries and are then subject to the approval of the Director-General of WHO. After four years of successful collaboration it is possible to redesignate a Centre for an additional period subject to past performance and the future needs of the Organization.
Geographical distribution of collaborating centers in countries of the Region of the Americas

4. At present, 182\textsuperscript{1} centers are located in the following countries of the Region of the Americas: Argentina (14), Bolivia (1), Brazil (19), Canada (30), Chile (4), Colombia (5), Costa Rica (2), Cuba (10), Grenada (1), Honduras (1), Jamaica (1), Mexico (9), Puerto Rico (1), United States of America (82), Uruguay (1), and Venezuela (1).

Country contributions for technical cooperation

5. Over the years, WHO has been strengthening its guidelines and policies for the designation of collaborating centers in order to ensure convergence with its priorities and strategies. In turn, the PAHO has taken action to ensure that collaborating centers are regarded as a key element for the technical cooperation provided not only by the Organization, but also among countries, as a successful example of Pan-Americanism.

6. The work plans prepared with each collaborating center include examples of scientific and technical innovation, exchange and dissemination of knowledge, information, and good practices, as well as capacity building, and strengthening of human resources for health.

7. These are mutually beneficial relationships: the Organization receives added value by forging partnerships and technical cooperation with national institutions, which contribute substantially to the Organization’s work in the Region and, at the same time, are themselves enriched by working in a global health context (3).

Linkages between the collaborating centers and the PAHO Strategic Plan 2014-2019 and the Sustainable Development Goals

8. Aware of the standards and directives that govern the collaborating centers, PAHO has been establishing processes that enhance the value of collaboration with these centers and ensure that it is convergent with the priorities framed in the WHO Programme Budget 2016-2017 and the PAHO Strategic Plan 2014-2019 (4), and with the Sustainable Development Goals (SDGs).

9. The collaborating centers are linked to five of the technical categories of the Strategic Plan. Of the 179 collaborating PAHO/WHO\textsuperscript{2} centers, 15% are linked to category 1 (communicable diseases), 18% to category 2 (noncommunicable diseases and risk factors), 25% to category 3 (health determinants and health promotion throughout the life course), 31% to category 4 (health systems), and 11% to category 5 (preparedness,

\textsuperscript{1} Location of PAHO/WHO collaborating centers, as of 12 July 2017, obtained through the WHO global database. Source: \url{http://apps.who.int/whocc/List.aspx?cc_region=AMRO&}.

\textsuperscript{2} Idem 1.
surveillance, and response). A summary of the main focus areas in which the PAHO/WHO collaborating centers are working is provided in Annex A.

10. This convergence strengthens the strategic function of the centers for the Organization, in particular toward the achievement of SDG 3: “Ensure healthy lives and promote well-being for all at all ages.” Given their global reach and the focus that many of them put on capacity-building at the local, regional, and global levels, these centers offer key instruments for the achievement of SDG 3 and other future targets (5).

11. Through the collaborating centers, PAHO also demonstrates its substantive participation in the achievement of SDG 17 target 9 (Capacity-building): “Enhance international support for implementing effective and targeted capacity-building in developing countries to support national plans to implement all the Sustainable Development Goals, including through North-South, South-South and triangular cooperation” (6).

**Activities aimed at the strengthening collaborating centers in the Region**

12. PAHO continually seeks to identify institutions that could become collaborating centers in the countries of the Region, especially in countries not yet represented. In addition to PAHO’s support for the global and regional thematic networks of the collaborating centers, the Organization has been implementing activities to increase the visibility of the collaborative work that these centers do, including:

a) creation of national networks in countries where there is more than one center;

b) establishment of a Web platform to disseminate results and to share, between PAHO and collaborating centers, experiences and lessons learned;

c) organization of meetings with collaborating centers to discuss relevant issues and to ensure effective collaboration focused on the achievement of the Organization’s mandates at the regional and global levels.

**Action by the Pan American Sanitary Conference**

13. The Conference is requested to take note of this report and offer any recommendations it deems pertinent.

Annex

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3 Detailed data are available in English at the following link: [http://iris.paho.org/xmlui/handle/123456789/34049](http://iris.paho.org/xmlui/handle/123456789/34049).
References


Annex

Below is a summary of the main focus areas in which the Pan American Health Organization/World Health Organization Collaborating Centres (PAHO/WHO CCs) are working. As this is not an exhaustive description of the terms of reference, for further detail, please refer to the WHO Collaborating Centres Global database.

This summary is organized by thematic areas and cross-referenced with WHO’s Programme Budget 2016-2017, PAHO’s Strategic Plan 2014-2019 and the targets of the Sustainable Development Goals (SDGs).¹

<table>
<thead>
<tr>
<th>Main Area of Focus of the PAHO/WHO CCs</th>
<th>Links to: WHO’s Programme Budget 2016-2017, PAHO’s Strategic Plan 2014-2019 and SDGs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide training, expertise and technical assistance in medical care, and disseminate and exchange information relating to integrated management of Chagas disease.</td>
<td>WHO PB: 1.4.1 PAHO SP: 1.3 SDG: 3.3</td>
</tr>
<tr>
<td>Provide advice to countries in planning, implementation and evaluation of the tuberculosis (TB) elimination strategy in the Americas.</td>
<td>WHO PB: 1.2.1 PAHO SP: 1.2 SDG: 3.3</td>
</tr>
<tr>
<td>Support towards malaria transmission reduction through the use of insecticide-treated materials and similar methods; case management of malaria illness; malaria prevention and management in pregnant women; early detection and response to outbreaks/epidemics; monitoring and evaluation, and elimination of malaria.</td>
<td>WHO PB: 1.3.1 PAHO SP: 1.3 SDG: 3.3</td>
</tr>
<tr>
<td>Provide support to update the situation of schistosomiasis in the American Region; technical assistance to endemic countries on monitoring and evaluation of preventive chemotherapy and elimination programs for the control of schistosomiasis.</td>
<td>WHO PB: 1.4.1 PAHO SP: 1.4 SDG: 3.3</td>
</tr>
<tr>
<td>Provide advice in dengue control with an integral focus and with regional and global networks. Collaborate in the collection of clinical, epidemiologic and virological</td>
<td>WHO PB: 1.4.2 PAHO SP: 1.3 SDG: 3.3</td>
</tr>
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</table>

¹ Sources:
## Communicable Diseases and Health Analysis

<table>
<thead>
<tr>
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</table>
| data that allows the recognition and improvement of dengue, providing training and capacity building. | WHO PB: 1.5.3  
PAHO SP: 1.5  
SDG: 3.8 |
| Provide technical advice, laboratory infrastructure development and methodological support and materials to countries in the development and evaluation of HIV vaccines. | |

## Noncommunicable Diseases (NCDs), Mental Health and Risk Factors

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</table>
| Support on training and capacity building efforts on preventive policies for NCDs, including strengthening capacity to make the case using economic arguments, systematic monitoring and dissemination of policy relevant information, case studies, and policy analysis methodology, among PAHO/WHO, countries and collaborating institutions involved. | WHO PB: 2.1.1  
PAHO SP: 2.1  
SDG: 3.4 |
| Provide specialized training to advance leadership capacity and strengthen tobacco control technical capabilities to promote and advocate for tobacco control at all levels, including dissemination of research results and best practices for tobacco control. | WHO PB: 2.1.2  
PAHO SP: 2.1  
SDG: 3.4 |
| Collaborate on international research projects, compilation, analysis and dissemination of data on alcohol, substance use and health issues worldwide and in the Americas. | WHO PB: 2.1.2  
PAHO SP: 2.2  
SDG: 3.5 |
| Assist in bridging the integration of mental health and NCDs in primary care settings as mutually enhancing perspectives. | WHO PB: 2.2.1; 2.2.2  
PAHO SP: 2.2  
SDG: 3.4 |
| Provide capacity for the research, training, surveillance and prevention of injuries, violence, road safety and disabilities in the Latin America and Caribbean Regions. | WHO PB: 2.3.1  
PAHO SP: 2.3; 2.4  
SDGs: 3.6; 5.2 |
| Assist in the development of food and nutrition policies for NCDs prevention through evidence-based monitoring and evaluation. | WHO PB: 2.5.1; 2.5.2  
PAHO SP: 2.5  
SDG: 3.4; 2.2 |
### Promoting Health throughout the Life Course

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</table>
| Support in the design of research methodologies in maternal-infant health and provide advice for the conduct of research. | WHO PB: 3.1.4  
PAHO SP: 3.1  
SDGs: 3.1; 3.2 |
| Collaborate in strengthening the evidence base, advocacy, and capacity building activities for violence prevention. | WHO PB: 2.3.3  
PAHO SP: 2.3  
SDG: 5 |
| Collaborate in strengthening capacity in midwifery and human resources through education and training. | WHO PB: 3.1.1  
PAHO SP: 3.1  
SDG: 3.1 |
| Provide support in the development and dissemination of specialized scientific knowledge on geriatrics and gerontology. | WHO PB: 3.2.1  
PAHO SP: 3.2  
SDG: 3.4 |
| Collect and synthesize evidence for the development and updating of WHO guidelines in the area of reproductive health. | WHO PB: 3.1.3  
PAHO SP: 3.1  
SDG: 3.7 |
| Provide technical cooperation on designing novel effective and efficient surveillance systems for oral diseases, conditions and behaviors measuring disease burden, quality of life and impact of preventive interventions. | WHO PB: 2.1.4  
PAHO SP: 2.1  
SDG: 3.4 |

### Determinants of Health, Health Equity and Environmental Health

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</table>
| Contribute to enhancing health governance, application of the human rights law framework to technical areas, promoting universal health and health equity. Building capacity in areas of health-related law and human rights. | WHO PB: 2.5.2; 4.2.1; 5.1.1  
PAHO SP: 3.3  
SDGs: 3.8; 10; 16 |
| Assist and strengthen the Organization’s capacity at regional and national levels for the effective delivery of health promotion, with a focus on social determinants of health, health equity and the health in all policies strategy to achieve the SDGs. Collect and disseminate scientific and technical information, develop methods and techniques for assessment, surveillance and interventions on housing and its environments. Support South-South technical cooperation. | WHO PB: 3.4.1; 3.4.2  
PAHO SP: 3.4  
SDGs: 3.8; 10 |
### Determinants of Health, Health Equity and Environmental Health

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<tr>
<td>Contribute to the Organization’s work in protecting the health of health workers. Support the construction of global, regional and national health systems, governance, capacities and service delivery for workers’ health – occupational health, safety for vulnerable groups and high risk sectors, and reduction of the burden of occupational diseases and injuries.</td>
<td>WHO PB: 3.5.1 PAHO SP: 3.5 SDGs: 3.8; 8</td>
</tr>
<tr>
<td>Collaborate in the field of environmental determinants of health, climate change, hazardous materials and public health; including organizing public awareness campaigns, training courses, generation of research and evidence-based materials, information and data analysis, surveillance and monitoring; and knowledge sharing.</td>
<td>WHO PB:3.4.3 PAHO SP: 3.5 SDGs: 3.9; 6; 12; 13</td>
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### Health Systems and Evidence

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<tr>
<td>Assist in the organization and development of patient safety, safe hospitals and integrated health services strategies and initiatives in achieving safer care. Collaborate with evidence generation, and synthesis, capacity building, knowledge translation and impact analysis at regional and global levels.</td>
<td>WHO PB: 4.2.3 PAHO SP: 4.2 SDGs: 3.8; 11</td>
</tr>
<tr>
<td>Assist countries in building/strengthening capacity on essential medicines, rational use of medicines and other health technologies, taking into account structural, educational, planning and evaluation processes.</td>
<td>WHO PB: 4.3.3 PAHO SP: 4.3 SDG: 3.8</td>
</tr>
<tr>
<td>Collaborate in the implementation of the strategic plans on eHealth and digital literacy, knowledge management and information access, public health ethics and research at regional and national levels.</td>
<td>WHO PB: 4.4.2; 4.4.4 PAHO SP: 4.4 SDGs: 3.8; 16; 17</td>
</tr>
<tr>
<td>Collaborate in strengthening human resources for health, highlighting the nursing workforce. Production and conduct of evidence-based research, information analysis and collection, guidelines, trainings and knowledge sharing and networking.</td>
<td>WHO PB: 4.2.2 PAHO SP: 4.5 SDG: 3.8</td>
</tr>
</tbody>
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<tr>
<td>Developing, maintaining and revising the WHO Family of International Classifications, Terminologies and Standards, in particular the International Classification of Diseases, the International Classification of Functioning, Disability and Health, the International Classification of Health Interventions, and relevant terminological and ontological aspects.</td>
<td>WHO PB: 4.4.1&lt;br&gt;PAHO SP: 4.4&lt;br&gt;SDGs: 3.8; 17</td>
</tr>
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### Health Emergencies – Preparedness, Surveillance and Response

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<tr>
<td>Cooperate in alert and response to outbreaks of emerging and dangerous pathogens of international importance, including outbreaks of arboviruses, viral hemorrhagic fevers, influenza, meningitis, poxviruses, other emerging infectious diseases and bacterial vector-borne diseases.</td>
<td>WHO PB: 5.1.1; 5.2.1&lt;br&gt;PAHO SP: 1.4; 5.1; 5.2&lt;br&gt;SDG: 3.D</td>
</tr>
<tr>
<td>Support timely progression towards universal safe and effective essential surgery and anesthesia with special emphasis on perioperative and anesthesia-related mortality and morbidity.</td>
<td>WHO PB: 4.2.1&lt;br&gt;PAHO SP: 5.3&lt;br&gt;SDG: 3.D</td>
</tr>
<tr>
<td>Assist in the implementation of the Safe Hospitals Initiative in the Americas.</td>
<td>WHO PB: 5.3.1&lt;br&gt;PAHO SP: 5.4&lt;br&gt;SDGs: 3.D; 11</td>
</tr>
<tr>
<td>Support national authorities to evaluate, develop and implement strategies to improve the health of short and long-term travelers.</td>
<td>WHO PB: 5.1.1&lt;br&gt;PAHO SP: 5.1&lt;br&gt;SDG: 3.D</td>
</tr>
<tr>
<td>Strengthen human and systems capacity for the public health aspects of mass gatherings in low resource settings.</td>
<td>WHO PB: 5.1.1&lt;br&gt;PAHO SP: 5.1&lt;br&gt;SDG: 3.D</td>
</tr>
<tr>
<td>Collaborate in strengthening national and regional integrated surveillance, investigation, prevention and control of foodborne and other enteric infections.</td>
<td>WHO PB: 5.4.2&lt;br&gt;PAHO SP: 5.4&lt;br&gt;SDG: 3.3</td>
</tr>
</tbody>
</table>