
UPDATE ON THE STATUS OF THE LATIN AMERICAN CENTER FOR PERINATOLOGY, WOMEN AND REPRODUCTIVE HEALTH

Introduction

1. The purpose of this document is to inform the Executive Committee regarding the proposal to update the institutional status of the Latin American Center for Perinatology, Women and Reproductive Health.

Background

2. The Latin American Center for Perinatology (CLAP) was created in 1970 through an agreement between the Government of the Eastern Republic of Uruguay, the University of the Republic of Uruguay, and the Pan American Health Organization (PAHO) (1). In 2005, as part of a decentralization process aimed at better reflecting cooperation priorities, CLAP was merged with the Women's Health Unit of the Pan American Sanitary Bureau (PASB) and renamed the Latin American Center for Perinatology, Women and Reproductive Health (CLAP/WR). The center began functioning as a decentralized unit linked to the Department of Family, Gender, and Life Course, which later became the Department of Family, Health Promotion, and Life Course. Since 2023, CLAP/WR has been part of the Department of Health Systems and Services. Its general goal is to promote, strengthen, and improve the capacities of the countries of the Region of the Americas in the area of women's, maternal, neonatal, and reproductive health.

3. Initially, CLAP was dedicated to training obstetricians and human resources for health in the clinical management of pregnancy, childbirth, and neonatal health; between 1970 and 2005, more than 4500 clinical professionals were trained. As national capacities in medical education, academic centers, and technology progressed at the regional level, the center's activities focused on reproductive, maternal, and neonatal health from a public health perspective, and it increased its technical cooperation in: *a)* the formulation and promotion of policy and legislative frameworks; *b)* the design, formulation, and implementation of strategies for human resources training and development; *c)* the development and promotion of guidelines for the maintenance of evidence-based information systems for surveillance, monitoring, evaluation, and decision-making; and *d)* the development and promotion of operations research aimed at closing persistent knowledge gaps in several related areas of action. Since 2005, CLAP/WR has worked within the framework of its dual role as a PAHO specialized center and as a decentralized technical unit of PASB.

4. In 2015, PAHO moved the CLAP/WR facilities from the University of the Republic to the PAHO/WHO Representative Office in Uruguay, resulting in savings and administrative efficiencies. The original 1970 agreement was terminated in 2017, when a new basic agreement was signed with the Government of Uruguay (without the participation of the University of the Republic). Unlike the original agreement, this one imposes no obligations on the Government of Uruguay to provide personnel, financial resources, or physical space for the center. Considering the Strategy for the Future of the Pan American Centers (2, 3)—which establishes the general criteria for the possible closure of a center, highlights the need to optimize PASB’s capacity to provide technical cooperation in the most effective and economical manner, and promotes financial contributions from the host government—CLAP/WR differs from other centers where the host country contributes essential resources for the support, maintenance, and operation of the center (4). The agreement signed in 2017 is in effect until 19 October 2024 and provides for automatic renewal for one-year periods unless either party gives 60 days’ notice of termination.
5. A comprehensive external evaluation of CLAP/WR was performed at the end of 2016. The results of the evaluation confirmed that the technical cooperation provided by CLAP/WR added value and was recognized by the ministries of health of the Region as a valuable PAHO resource. The study also highlighted aspects that limited the efficiency of technical cooperation and interprogrammatic coordination, entailing difficulties for PAHO in terms of strategy and operations.
6. Pan American centers have been an important modality of PAHO technical cooperation for over 60 years, but this situation has changed as national capacities have developed in the areas of human resource training and research. The need to update the institutional status of CLAP/WR responds to the Director’s mandate to take the most appropriate measures to improve the cost efficiency and the effectiveness of the centers in terms of use of available resources (5), to a process already carried out with other Pan American centers in the Region, and to the PAHO Forward initiative (6) and the Strategy for the Future of the Pan American Centers (2, 3), which provides an update on various technical, administrative, and managerial aspects of the Pan American centers in relation to their specific functions and mandates.

Study of the Situation

7. There is an extensive unfinished agenda for primary health care and maternal, reproductive, and neonatal health. A lack of comprehensiveness, as well as inequalities in access marked by social determinants, constitute a major challenge that translates into high and persistent rates of maternal and neonatal mortality, as well as problems in accessing sexual and reproductive health services. This highlights the need to strengthen and better integrate CLAP/WR interventions to meet the commitments made by the countries of the Region in relation to targets 1, 2, and 7 of Sustainable Development Goal 3 (7).
8. Since 2020, CLAP/WR has focused its work mainly on: *a)* reducing the negative impact of the COVID-19 pandemic on priority health programs such as the maternal, neonatal, and reproductive health program; *b)* expanding access to sexual and reproductive health services; *c)* expanding policies on women’s health and neonatal health; and *d)* integrating these actions into resilient national health systems based on renewed and strengthened primary health care. CLAP/WR currently provides technical cooperation in the framework of resolutions related to the Strategy for Universal Access to

Health and Universal Health Coverage (8, 9) and the Plan of Action for Women's, Children's, and Adolescents' Health 2018–2030 (10, 11), whose indicators and targets are guiding references.

9. The approved CLAP/WR budget for the 2024–2025 biennium is US\$ 6 323 000.¹ Currently, the center's staff is composed of 4 international professionals, 2 general service staff members, 1 staff member assigned by the Ministry of Health of Uruguay, and 5 locally recruited workers, at a cost of \$1 648 972 per year, of which \$1 020 575 corresponds to the 4 professional posts. In addition, general operating expenses come to \$110 000 per year, bringing total annual operating costs to \$1 758 972.

Proposal

10. In June 2020, the then Director of PASB established the Internal Steering Committee for the Review of Strategic Functions to examine all core functions and structural elements of the Organization, in response to the financial crisis. The Committee's recommendations, which later evolved into a number of organizational development initiatives, were based on a high-level strategic functional review, providing an analytically sound basis for the Director to make decisions on technical priorities, organizational structures and processes, and cost-cutting measures. The evaluation of Pan American centers, carried out as part of this process, highlighted the need to establish an even clearer distinction between CLAP/WR's roles as a specialized center and decentralized technical unit.

11. As part of the PAHO Forward initiative (6), in 2023 the current Director of PASB set the objective of strengthening efficiency, transparency, and accountability. This involves, among other things, optimizing PASB's organizational structure to better respond to the demand for technical cooperation, considering the current and evolving regional and global context, as well as lessons learned from the COVID-19 pandemic. In response to these priorities, it is necessary to restructure departments and units, which involves increasing the capacity to respond to countries' needs in an interprogrammatic, coordinated, and more efficient manner.

12. In this context, it is proposed to update the institutional status of CLAP/WR by creating a women's, maternal, neonatal, and reproductive health unit in which the center's functions are incorporated at PAHO Headquarters in Washington, D.C., and at the same time closing CLAP/WR in Uruguay.

13. The purpose of including the center's functions at PAHO Headquarters is to increase the Organization's technical cooperation capacity in the areas of women's, maternal, neonatal, and reproductive health, and to implement the corresponding mandates by efficiently and effectively integrating this issue into cooperation for the strengthening of primary health care and the development of health systems.

14. This proposal implies the closure of CLAP/WR as a PAHO Pan American center; termination of the current agreement with the Government of Uruguay; and the transfer of the center's functions to PAHO Headquarters in Washington, D.C. The relocation of functions will entail the transfer of the 4 international professional posts, as well as programmatic and administrative services, to

¹ Unless otherwise indicated, all monetary figures in this document are expressed in United States dollars.

Headquarters, resulting in a 28.40% reduction in annual costs. This is due to the reduction in personnel and the integration of the center's technical, programmatic, and administrative functions at PAHO Headquarters that already has these functions, as detailed in the table below:

Comparative analysis of the annual costs of CLAP/WR in Uruguay and a new Women's, Maternal, Neonatal, and Reproductive Health Unit at PAHO Headquarters

	Current cost of CLAP/WR in Uruguay (in US\$)	Cost of a new technical unit (in US\$)	Increase or decrease (%)
Four professional posts	1 020 575	1 146 320	12.32
General services posts	159 925	113 000	-29.34
Additional staff	468 472	0	-100
Subtotal	1 648 972	1 259 320	-23.63
General operating expenses	110 000	0	-100
Total	1 758 972	1 259 320	-28.40

15. If this proposal is approved, a one-time expense of approximately \$113 000 would be incurred to cover expenses related to the closure of the center.

16. The Director of PASB has formed an interdepartmental working group to ensure that CLAP/WR functions and operations are transferred smoothly to PAHO Headquarters.

Action by the Executive Committee

17. The Executive Committee is invited to examine the information presented in this document, provide any comments it deems pertinent, and consider adopting the draft resolution presented in Annex A.

Annexes

References

1. Pan American Health Organization. Agreement for the Establishment of a Pan American Center for Perinatology and Human Development in the Oriental Republic of Uruguay. Montevideo: PAHO; 1970. Available (in Spanish) from: <https://www.paho.org/es/documentos/convenio-creacion-clap>.
2. Pan American Health Organization. Strategy for the Future of the Pan American Centers: Current Status of the Pan American Centers [Document CD46/10]. 46th PAHO Directing Council, 57th Session of the Regional Committee of WHO for the Americas; 26–30 September 2005. Washington, D.C.: PAHO; 2005. Available from: <https://www3.paho.org/english/GOV/CD/cd46-10-e.pdf>.

3. Pan American Health Organization. Strategy for the Future of the Pan American Centers [Resolution CD46.R6] 46th PAHO Directing Council, 57th Session of the Regional Committee of WHO for the Americas; 26–30 September 2005. Washington, D.C.: PAHO; 2005. Available from: <https://www3.paho.org/english/GOV/CD/cd46.r6-e.pdf>.
4. Pan American Health Organization. Policy guidelines regarding the Pan American centers [Document CD31/10]. 31st Directing Council of PAHO, 37th Session of the Regional Committee of WHO for the Americas; 23–28 September 1985. Available from: <https://iris.paho.org/handle/10665.2/6741>.
5. Pan American Health Organization. Policy guidelines regarding the Pan American centers [Resolution CD31.R24]. 31st Directing Council of PAHO, 37th Session of the Regional Committee of WHO for the Americas; 23–28 September 1985. Available from: <https://iris.paho.org/handle/10665.2/2294>.
6. Pan American Health Organization. PAHO Forward: an organization-wide approach to strengthen efficiency, transparency, and accountability. Washington, D.C.: PAHO; 2023. Available from: <https://iris.paho.org/handle/10665.2/58554>.
7. Pan American Health Organization. Status of Access to Sexual and Reproductive Health Services [Document CD60/INF/4]. 60th PAHO Directing Council, 75th Session of the Regional Committee of WHO for the Americas; 25–29 September 2023. Washington, D.C.: PAHO; 2023. Available from: <https://www.paho.org/en/documents/cd60inf4-status-access-sexual-and-reproductive-health-services>.
8. Pan American Health Organization. Strategy for Universal Access to Health and Universal Health Coverage [Document CD53/5, Rev. 2]. 53rd PAHO Directing Council, 66th Session of the Regional Committee of WHO for the Americas; 29 September–3 October 2014. Washington, D.C.: PAHO; 2014. Available from: https://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=27312&Itemid=270&lang=en.
9. Pan American Health Organization. Strategy for Universal Access to Health and Universal Health Coverage [Resolution CD53.R14]. 53rd PAHO Directing Council, 66th Session of the Regional Committee of WHO for the Americas; 29 September–3 October 2014. Washington, D.C.: PAHO; 2014. Available from: https://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=27600&Itemid=270&lang=en.
10. Pan American Health Organization. Plan of Action for Women’s, Children’s and Adolescents’ Health 2018-2030 [Document CD 56/8, Rev. 1]. 56th PAHO Directing Council, 70th Session of the Regional Committee of WHO for the Americas; 23–27 September 2018. Washington, D.C.: PAHO; 2018. Available from: https://www3.paho.org/hq/index.php?option=com_docman&view=document&alias=46461-cd56-8-e-poa-wca&category_slug=56-directing-council-english-9964&Itemid=270&lang=en.

11. Pan American Health Organization. Plan of Action for Women's, Children's and Adolescents' Health 2018-2030 [Resolution CD56.R8]. 56th PAHO Directing Council, 70th Session of the Regional Committee of WHO for the Americas; 23–27 September 2018. Washington, D.C.: PAHO; 2018. Available from:
https://www3.paho.org/hq/index.php?option=com_docman&view=document&alias=46588-cd56-r8-e-poa-wca&category_slug=56-directing-council-english-9964&Itemid=270&lang=en.

CE174/26

Annex A
Original: Spanish

Proposed Resolution

UPDATE ON THE STATUS OF THE LATIN AMERICAN CENTER FOR PERINATOLOGY, WOMEN AND REPRODUCTIVE HEALTH

The 174th Session of the Executive Committee,

(PP) Having examined the *Update on the Status of the Latin American Center for Perinatology, Women and Reproductive Health* (Document CE174/26),

Resolves:

(OP) To recommend that the 61st Directing Council adopt a resolution along the following lines:

UPDATE ON THE STATUS OF THE LATIN AMERICAN CENTER FOR PERINATOLOGY, WOMEN AND REPRODUCTIVE HEALTH

The 61st Directing Council,

(PP1) Having examined the *Update on the Status of the Latin American Center for Perinatology, Women and Reproductive Health* (Document CD61/);

(PP2) Recognizing that Pan American centers have been an important modality of technical cooperation for the Pan American Health Organization (PAHO) for over 60 years, but that this situation has evolved with the development of national capacities in the areas of human resource training and research;

(PP3) Considering that appropriate measures should be taken to improve the cost-effectiveness and efficiency of the centers in terms of the use of available resources to respond to the needs identified by PAHO Member States;

(PP4) Recognizing the contribution of the Latin American Center for Perinatology, Women and Reproductive Health (CLAP/WR) in promoting, strengthening, and improving the capacity of the countries of the Region of the Americas in relation to women's, maternal, neonatal, and reproductive health since its creation in 1970;

(PP5) Considering the need to increase PAHO's capacity for technical cooperation in the areas of women's, maternal, neonatal, and reproductive health, and to efficiently and effectively integrate this with cooperation for the strengthening of primary health care and the development of health systems,

Resolves:

(OP)1. To take note of the proposal to update the institutional status of CLAP/WR.

(OP)2. To note that the creation of a women's, maternal, neonatal, and reproductive health unit that incorporates the center's functions at PAHO Headquarters in Washington, D.C. will enhance PAHO's technical cooperation capacity in the area of women's, maternal, neonatal, and reproductive health.

(OP)3. To approve the closure of CLAP/WR as a PAHO Pan American center and the transfer of its functions to PAHO Headquarters in Washington, D.C.

(OP)4. To request the Director to:

- a) take the necessary measures to close CLAP/WR as a PAHO Pan American center, terminate the current agreement with the Government of Uruguay, and transfer CLAP's functions to PAHO Headquarters in Washington, D.C., as of January 2025;
- b) ensure that the functions and operations of CLAP/WR are seamlessly transferred to PAHO Headquarters;
- c) thank the Government of Uruguay for its support, acknowledging its contributions during the different stages of CLAP's existence in the country.

Analytical Form: Programmatic and Financial Implications

<p>1. Agenda item: 5.7 Update on the Status of the Latin American Center for Perinatology, Women and Reproductive Health</p>
<p>2. Responsible unit: Department of Health Systems and Services/Latin American Center for Perinatology, Women and Reproductive Health (CLAP/WR)</p>
<p>3. Preparing officers: Dr. James Fitzgerald, Director, Health Systems and Services; and Dr. Suzanne Jacob Serruya, Director, CLAP/WR</p>
<p>4. List of collaborating centers and national institutions linked to this Agenda item:</p> <p>CLAP has established technical cooperation with all PAHO Member States, professional associations (FIGO, FLASOG, IPA, ALAPE, WAS, ICM, FLO, and FEPPEN, among others), interagency coordination mechanisms (GTR, Neonatal Alliance), partners (UNICEF, LAC Forum, UNFPA) and 6 collaborating centers: WHO-CC-CHI-18 School of Midwifery of the University of Chile; WHO-CC-ARG-42 Centro Rosarino de Estudios Perinatales (CREP); USA-379 Center for Global Health, School of Public Health, University of Colorado—WHO Collaborating Centre for Promoting Family and Child Health; BRA-87: Oswaldo Cruz Foundation (FIOCRUZ); WHO Collaborating Center to Strengthen Human Milk Banks; USA-351 Department of Maternal and Child Health, School of Public Health, University of North Carolina—WHO Collaborating Center for Research for Sexual and Reproductive Health.</p>
<p>5. Link between Agenda item and the Sustainable Health Agenda for the Americas 2018–2030:</p> <p>Goal 1: Expand equitable access to comprehensive, integrated, quality, people-, family-, and community-centered health services, with an emphasis on health promotion and illness prevention.</p>
<p>6. Link between Agenda item and the Strategic Plan of the Pan American Health Organization 2020–2025:</p> <p>Impact Indicator 3: Neonatal mortality rate</p> <p>Impact Indicator 6: Maternal mortality ratio (MMR) (deaths per 100 000 live births)</p>
<p>7. Time frame for implementation and evaluation: N/A</p>

8. Financial implications:**a) Total estimated cost for implementation over the lifecycle of the resolution (including staff and activities):**

Comparative analysis of the annual costs of CLAP/WR in Uruguay and a new Women's, Maternal, Neonatal, and Reproductive Health unit at PAHO Headquarters.

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b) Estimated cost for the 2024-2025 biennium (including staff and activities):

In 2024, a one-time expense of approximately US\$113 000 would be incurred to cover expenses related to the closure of the center.

c) Of the estimated cost noted in b) above, what can be subsumed under existing programmed activities? N/A