

Methodology for the Consultations with Member States and other Stakeholders to develop the PAHO Strategic Plan 2026-2031

Introduction

1. This document outlines the methodology for conducting consultations with Member States and other stakeholders for the development of the Strategic Plan of the Pan American Health Organization 2026-2031 (SP26-31), following the endorsement of the roadmap presented to the 174th Executive Committee ([CE174/INF/1](#)) in June 2024.
2. The SP26–31 development process will utilize a wide-ranging participatory engagement approach to collaborate with Member States and other stakeholders in a strategic and transparent manner. The process will include multiple virtual consultations and information sessions, as well as opportunities to obtain input in writing through other means, at key junctures in the process. These consultations will help to ensure that the next PAHO Strategic Plan is technically sound, results-based, country-focused, and represents the collective priorities and commitments of Member States, as well as the views and perspectives of other stakeholders.

Collaborative Groups

3. The collaboration of PASB, Member States, and other stakeholders is key to the development of a sound, robust, and comprehensive Strategic Plan. The SP26–31 development process will therefore involve consultations with all Member States and other stakeholders (e.g. civil society, international organizations, subregional integration mechanisms, PAHO/WHO collaborating centers, academia, the private sector, and youth groups), including those outside the health sector. Further information on the collaborative groups is provided below:
 - a. **Pan American Sanitary Bureau (PASB)** PASB is responsible for preparing the SP26-31 and will coordinate the entire development process, including providing logistical support and strategic and technical guidance to all involved. It will ensure that the Plan is developed according to the established guidelines and timeline and that the proposal presented to Governing Bodies is consistent with the Director’s vision and respond to the Organizational mandates and the needs and priorities of countries.

- b. **Member States:**

The responsibility for the approval of the Strategic Plan rests with the Member States through the Governing Bodies. Member States will be consulted through virtual information sessions and direct consultations. The PASB will organize consultations with all Member States, as well as by subregional groupings, to address specific concerns and common challenges. These subregional consultations will ensure that the unique needs and priorities of different groups of countries are adequately reflected in the SP26-31.

During these consultations, it is essential for Member States to ensure the participation of health ministry personnel with the appropriate profile and knowledge of national, regional, and/or global health situations. Such personnel may include public health experts, health planners, health analysts, epidemiologists, and international health specialists with decision-making authority who understand the breadth of PASB's technical cooperation.

Member States are encouraged to identify collective priorities where PASB adds value and is uniquely positioned to collaborate with countries to address public health challenges.

c. Other stakeholders

PASB recognizes the importance of consulting with other stakeholders, including those beyond the health sector. Engaging these stakeholders is expected to bring diverse knowledge, perspectives, and expertise to enrich the development of the Strategic Plan. This inclusive approach aims to ensure that the Strategic Plan is realistic and comprehensive while reflecting the region's collective priorities.

- **All PAHO/WHO Collaborating Centers:**

A PAHO/WHO Collaborating Centre¹ is an institution designated by the Director-General of the World Health Organization (WHO) to support the organization's programs. These centers can be research institutes, universities, academic institutions, or other institutions. They form part of an international collaborative network that works on various health-related areas such as communicable diseases, nutrition, mental health, and health technologies. These centers help strengthen national health resources through research, training, and information.²

- **All Non-state Actors with official relations:**

PAHO interacts with non-State Actors (NSA) for the advancement and promotion of public health and to encourage non-State actors to use their own activities to protect and promote public health. Official relations are a privilege that the PAHO Executive Committee may grant to eligible NSA that have had, and continue to have, sustained and systematic engagement with PAHO, which is assessed by both parties as being mutually beneficial. Official relations may only be granted to non-governmental organizations, international business associations and philanthropic foundations. NSA

¹ [About WHO: Collaborating centres](#)

² As of June 2024, there are 169 PAHO/WHO CC in the Region of the Americas, including 9 who have a status of "pending". The distribution of these PAHO/WHO CC by country is as follows: ARG (12), BRA (20), CAN (29), CHL (9), COL (3), CRI (2), CUB (6), HND (1), JAM (1), MEX (11), PER (1), TTO (2), URY (2), and USA (70)

considered to be private sector, except for international business associations and academic institutions, are not eligible for official relations.³

Other NSAs, who do not have the Official Relations status but who have been FENSA cleared (Framework for Engagement with Non-State Actors) may also be consulted.

- **UN Agencies and other intergovernmental organizations:**
UN and other intergovernmental agencies and organizations that work closely with PAHO or that have a bearing on PAHO's technical cooperation in health in the Americas.
- **Subregional integration mechanisms:**
Subregional mechanisms and organizations, including the Southern Common Market (MERCOSUR), the Caribbean Community (CARICOM), Central American Integration System (SICA), the Andean Community, Amazon Cooperation Treaty Organization (ACTO), and the Community of Latin American and Caribbean States (CELAC), among others, to facilitate the consideration of subregional priorities, where appropriate and relevant.
- **Civil Society (including youth groups)**
PASB will reach out to established civil society networks with which it collaborates, leveraging existing relationships and communication channels. PASB will draw on World Health Organization's (WHO) experience engaging with civil society during the development of the Global Programme of Work (GPW14), applying best practices and lessons learned to facilitate meaningful participation.
- **Donors**
Donors provide valuable insights and resources that are essential for the successful implementation of the SP26-31. This collaborative approach will help build a stronger engagement, ultimately contributing to the overall success of the Strategic Plan.

Methods for information exchange

4. Below are the different opportunities/mechanisms available for engaging on the development of the SP26-31:
 - a. **Virtual information sessions and consultations:** PASB will organize virtual meetings with Member States, as well as with other stakeholders. These meetings will provide a platform for interactive and iterative discussions and feedback on the proposed Plan. The consultations will

³ As of June 2024, there are 37 NSA with official relations with PAHO. The list on NSA is available here: [CE174/7 - Non-State Actors in Official Relations with PAHO - PAHO/WHO | Pan American Health Organization](#)

be conducted in the four official languages of the Organization. PASB will communicate the objectives and expectations of each meeting in advance.

PASB will strive to share all documents at least two weeks prior to consultations or information sessions in English and Spanish, allowing Member States and other stakeholders ample time to review, conduct internal consultations, and prepare their feedback. While Member States are requested to nominate up to two focal points with whom the PASB may communicate and coordinate for plan development, including the organization of the consultations, member states' participation in the consultation is not restricted to these focal points.

- b. **Open (PAHO) Site:** PASB will utilize the PAHO website as a platform for sharing updates and different versions of the Plan. All relevant documents and updates will be posted on this website [[under development](#)] for Member States and other stakeholders to review and consult as needed. The site will also serve as a repository of information throughout the development process of the SP26-31.
- c. **In Writing:** Member States and other stakeholders will have the opportunity to provide written feedback or recommendations at any point during the development of the Plan. This can be done via email [strategicplan26-31@paho.org]. PASB will review the input and consolidate for discussion with the wider group.
- d. **Surveys:** PASB may periodically distribute surveys to gather quantitative and qualitative data from Member States and other stakeholders. This will help in understanding the collective perspective, reach consensus, and take corrective actions, as necessary.

Principles

5. To ensure a robust and comprehensive consultation process for developing the SP26-31, the following guiding principles are proposed.
 - a) **Equality:** ensure all Member States have equal opportunities to participate, be heard, and have their input considered in the plan development process. PASB will engage with each Member State bilaterally at country level as in the case of the country strategic input, and collectively at regional level through the consultation and information sessions. Additionally, PASB will conduct targeted consultations with groups sharing similar priorities and/or challenges.
 - b) **Inclusivity:** Recognizing the value of diverse opinions and perspectives, PASB will seek to consult all Member States and other stakeholders, regardless of their size, influence, or location, and will make efforts to engage marginalized or underrepresented groups. The Secretariat will also foster a cooperative environment where all can contribute their ideas and expertise, maintaining mutual respect and understanding among all participants.
 - c) **Transparency:** Information, processes, and decisions will be shared openly in a timely and accessible manner. PASB will ensure transparency by maintaining open communication

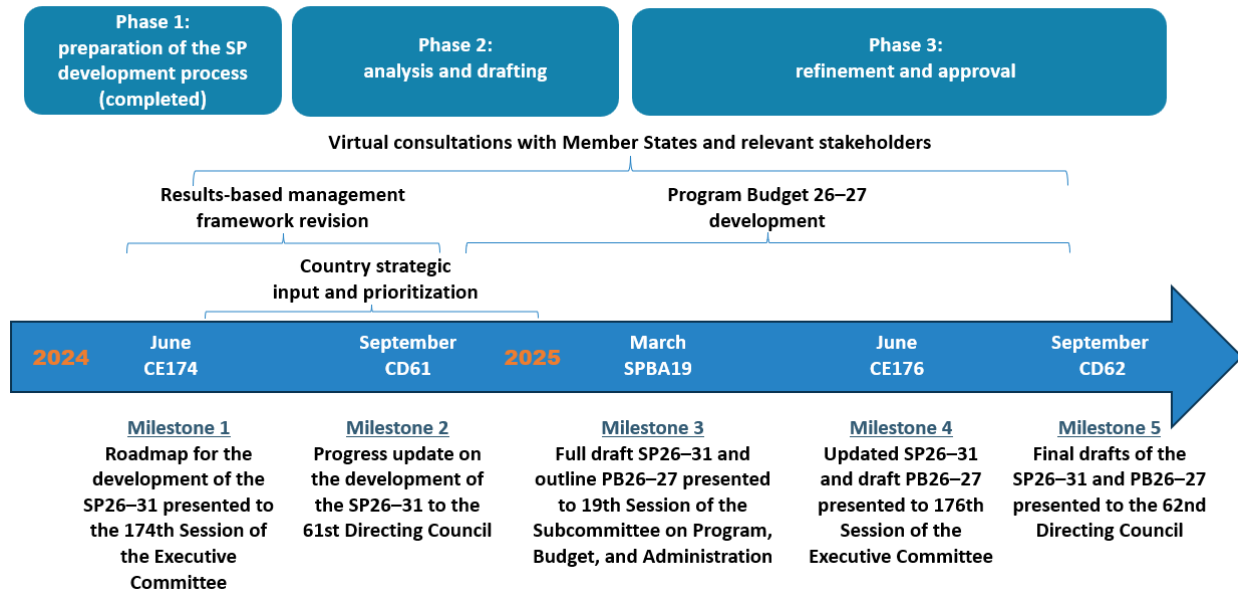
channels, and regularly updating all Member States and other stakeholders on progress. Additionally, as necessary, PASB will establish feedback mechanisms and surveys to assess and address any concerns or issues during the development of the Plan.

- d) **Efficiency and Effectiveness:** PASB will strive for efficient use of resources to effectively achieve the desired objectives during the consultation process. It will undertake careful planning, including setting clear timelines and milestones, provide clear communication, and foster effective coordination among all parties. The PASB will identify, monitor, and address risks that may affect the effectiveness of the consultations.


Reference

[CE174/INF/1 - Roadmap for Developing the Strategic Plan of the Pan American Health Organization 2026–2031 - PAHO/WHO | Pan American Health Organization](#)

Annex 1. Developing the PAHO SP26-31: Key Steps and Milestones



Annex 2. Template for MS and stakeholders to provide feedback

|  PAHO |
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| Member State/Partner: |
| Date: |
| Document/version under review: |
| Comment [<i>Please indicate the page and/or paragraph number when providing specific comments on a document. Alternatively, you can attach the document with edits in track changes and provide overall comments using this form</i>]: |
| Additional feedback: |