



**Pan American  
Health  
Organization**



**World Health  
Organization**  
REGIONAL OFFICE FOR THE  
**Americas**

**BIREME**

Latin American and Caribbean Center on  
Health Sciences Information

## **Fourth Session of the Scientific Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME)**

**BIREME/PAHO/WHO**

**Evidence and Intelligence for Action in Health (EIH)**

The Fourth Session of the Scientific Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME/PAHO/WHO) was held at BIREME, in São Paulo, Brazil, on December 3<sup>rd</sup>, 2018, in compliance with Resolution 5 of the 49<sup>th</sup> Directing Council of PAHO/WHO (CD49.R5) in which the BIREME Statute was approved, in effect since the year 2010, which defines its new institutional framework.

The current members of the Scientific Committee (SC) were nominated during the Seventh Session of the Advisory Committee of BIREME on February 2, 2017 for a three-year mandate (2017-2019) and had already participated at the Third Session of the SC carried out on December 7 and 8, 2017. They are experts from 6 (six) PAHO/WHO Member States: Brazil, Colombia, Costa Rica, Cuba, Jamaica and Mexico.

### **FINAL REPORT**

São Paulo (SP), December 3, 2018

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## FINAL REPORT

### OPENING OF THE SESSION

- 1) On December 3<sup>rd</sup>, 2018, at BIREME in the city of São Paulo, Brazil, the Fourth Session of the Scientific Committee of the Center was held, complying with the consultative functions before the Advisory Committee and the Director of PAHO/WHO. The Session began with the welcome words extended by Silvia Almeida de Valentin (Administrator of BIREME) representing Diego González Machín, Director of BIREME and *ex officio* Secretary of the Scientific Committee that were accompanying PAHO/WHO Director, Carissa F. Etienne, who joined the session during the afternoon period. The support of the members of BIREME's Governance Committees, that represent the Member States of the Organization, was also acknowledged.
- 2) The PAHO/WHO Director, Carissa F. Etienne, arrived in São Paulo, Brazil during the morning of December 3<sup>rd</sup>, 2018 to participate at the Fourth Session of BIR SC and the opening and closing sessions of the events of the 7<sup>th</sup> Edition of the Regional Coordination Meeting of the Virtual Health Library (VHL7 - <https://crics10.org/bvs7/en/>) and the 10<sup>th</sup> Edition of the Regional Congress on Health Sciences Information (CRICS10 - <https://www.crics10.org/>), on December 4<sup>th</sup>, 2018.
- 3) Experts from the Scientific Committee were thanked for their presence and participation and the importance of holding the meeting in the framework of the Centers development was underscored. The Committee members introduced themselves and the session began.
- 4) The following experts were elected to set up the Board of the BIREME Scientific Committee in its fourth session:

<b>Chair:</b>	Efren Carlos Oropeza Abúndez (Mexico)
<b>Rapporteur:</b>	Jaider Ochoa Gutierrez (Colombia)

### PRESENTATIONS

- 5) Presentations 1 and 2 “*Meeting Objectives and the BIREME Governance Structures: Advisory Committee and Scientific Committee*” and “*Management and Work Plan 2018-2019: initiatives, products and services*”. By Silvia de Valentin (Administrator of BIREME)
  - Initially the main goals of the SC were highlighted. They are set forth in Article VII of the BIREME Statute

- The role of the SC is to maintain and improve BIREME’s capacities to continue on with the development of methodologies, technologies, products and services, as well as events that characterize the national and international information systems and scientific communication in health, and the challenges to insert them into the context of Latin America and the Caribbean countries. In this sense, the scientific committee offers support in:
  - Setting forth recommendations to the Advisory Committee (AC)
  - Advises the director of BIREME and the PAHO/WHO Director on information methods and technologies
  - Offers advice in the adoption of scientific communication innovations
  - Contributes to the preparation of the Biannual Work Plan (BWP)
  - Proposes recommendations for partnerships that may be made
- BIREME’s institutional framework is based on 4 pillars:
  - Strategic plan and work plan for technical cooperation of PAHO/WHO
  - BIREME Statute
  - BWP for the 2018-2019 period
  - Financial management and resources at the WD/PMIS

### **Pillar 1: Strategic Plan**

The BIREME/PAHO/WHO institutional framework management is part of the 2014-2019 Strategic Work Plan and the PAHO/WHO Work Plan for Technical Cooperation, that rely on six strategies:

- Communicable diseases
- Non-communicable disease and risk factors
- Health determinants and the promotion of health throughout a person’s entire life
- Health systems. **Where there is an impact of BIREME’s projects, products and services**
- Preparation, surveillance and response (Emergencies in health)
- Leadership and Governance

Particularly regarding the Health system, PAHO places its bets on strengthening the health systems based on primary health care, for the implementation of progressive Universal Health Coverage; organization for the rendering of integral health care services centered on people; the promotion of access to medication and sanitary technologies, as well as their rational use; **strengthening of information systems and the integration of evidence in their policies and health care**; and the development of human resources for health.

When it comes to information systems, the support offered by BIREME is fundamental and this is where the activities and the work plans presented can be fully justified

## **Pillar 2: BIREME Statute**

- Regarding compliance with Article IV: PAHO member states, WHO member states and public international organizations in information and scientific-technical communication. This is under implementation, as it implies commitments for financial contributions.
- Regarding Article IX (Finances). It is necessary to increase the presence of members to increase financial contributions.
- In terms of the headquarters agreement and the institutional framework approved in 2010, which is still under implementation; here it is important to keep in mind that the Brazilian Government contributes resources. There is also ongoing work in cooperation with this government, as well as the mechanisms for the presence and work, not only in Brazil but throughout the entire region.

## **Pillar 3: Biannual work plans. Present period: 2018-2019**

- The budget for the present plan is of 7 million dollars, earmarked from different funding sources.
- It considers the recommendation of the Governance Committees.
- It counts upon effective and constant monitoring in accordance to PAHO policies, internal and external audits. Six-monthly evaluations with the PAHO director.
- There are four initiatives within the framework of the plan:
  1. Information and knowledge management
  2. Information services
  3. Intelligence in information in Health Sciences
  4. BIREME leadership and management
- Until the end of October 2018, the initiatives reported the following strides:
  - Initiative 1 with 15 projects and an estimated cost of US\$ 2,790,000, attained 35% of execution, representing an investment of US\$974,161.
  - Initiative 2 with 7 projects and an estimated cost of US\$984,000, attained 28% of execution, representing an investment of US\$275,202.
  - Initiative 3 with 5 projects and an estimated cost of US\$393,000, achieved an execution of 33%, representing an investment of US\$129,183.
  - Initiative 4 with 5 projects and estimated of US\$393,000, achieved a development of 42% (US\$129,183), mainly for holding CRICS10.
- **CRICS 10:** one of the main events in health information in the region and worldwide. It contained seven thematic axis/round tables: knowledge management, open science, information management, innovation and digital health, intersectoral, policies, strategies and evidence-based decisions, research and scientific communication. Additionally, it had the participation of 25 renowned speakers as international experts and the participation of professionals from 32 countries.

#### **Pillar 4. Financial management through the ERP WD/PMIS system**

- Action lines for this pillar:
  - Monitoring cash flow
  - Project management jointly with donors
  - Internal controls and compliance with rules and procedures
- Main financing sources: From the total forecast, US\$4.071.000 have been received. Contributions were made through the following sources for the 2018-2019 biennium:
  - PAHO/WHO Headquarters: US\$ 1,929,000
  - Brazilian Health Ministry (MINSAL): US\$918,000
  - Other technical cooperation projects: US\$519,403
  - PAHO/WHO Brazil: US\$125,000
  - WHO: US \$25,000
  - Balance from the Biannual Work Plan 2016-2017: US\$563,338
- Regarding these resources for the PTB, the resources contributed based on the transfer of resources through cooperation terms via PAHO/WHO Brazil are highlighted, for an amount of US\$1,142,903; and the MINSAL contributions, amounting to US\$918,459, that include funds for the enhancement and technical cooperation with BIREME
- Presently there are nine cooperation terms (via PAHO/WHO Brazil) contributing to the BIREME BWP18-19, which represent a grand total of US\$2,061,362
- The main financing sources are:
  - Regular PAHO/WHO resources
  - Annual contribution of the Brazilian Ministry of Health
  - Technical cooperation projects in Brazil
  - Project with the countries in the region
- To reduce financing gaps, we hope:
  - To implement a plan to mobilize BIREME resources
  - To foster participation in global, regional, sub-regional and inter-programmatic projects
  - To formalize the terms of cooperation with the Government of Brazil for the year 2019
  - To cooperate with the TC with PAHO/WHO Brazil in a context of health priorities in the country
  - To cooperate with projects in the countries of the region

**Scientific Committee questions and/or comments**

Question and/or comments	Answers
Which is BIREME's situation and opinion regarding Brazil's new government?	BIREME continues to work normally, as usual, and jointly with the Government of Brazil. In the Advisory Committee session, the representative of Brazil recommended showing the activities, impacts and using indicators to measure the impact generated. Similarly, this person is part of the transition government for the beginning of the new government.  On the other hand, it is important to develop mechanisms for the joint activities between the advisory committee and the scientific committee that can be presented publicly.
What do you know regarding the situation of the expelled Cuban doctors?	The doctors from Cuba were not expelled from the country. The agreement was breached. There is not much information because this was handled by the PAHO/WHO Brazil and PAHO/WHO Headquarters
It is important to give thrust to the work with cooperation projects and cooperating centers.  In so far as they are able to obtain greater impact and a better positioning, despite the changes, they could have greater projection; thus, allowing such cooperation projects in health systems	
The biannual plan is ambitious. There are 37 projects. ¿Would all be put in place in 2019?	Some projects date back to the previous biennium. For example, the initiative Intelligence in Information in Health Sciences.
Do the technical cooperation projects generate resources for Bireme?	We do not have a culture of profit, through these projects we contribute to supporting the maintenance of fixed costs. More specifically, the organization has a percentage that varies between 3 and 6%, if

	<p>something needs to be covered, they are covered through these funds for maintenance.</p> <p>The regular resources, where a cooperating source finances the development of a process or service, this source could allocate its own resources to support development.</p>
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6) Presentation 3 “*Information Services and Products*”. By Carmen Verônica Abdala (PFI/SCI BIREME)

- BIREME mainly focuses on information management. The development of capacities in the countries network of countries, this should generate applied knowledge to enhance health systems.
- Context is key to develop information services. Evidence is required to identify the best options that will benefit the population and therefore, the design of public health policies. Faced with this, joint work is required between scientists and politicians to achieve solutions.
- Technical cooperation activities contribute to:
  - Increasing the visibility of scientific production in health. In this field, products such as LILACS have been fundamental.
  - Developing products and services to translate knowledge. How to be able to translate scientific information so that, as an example, a physician can include scientific information in his/her daily work.

The main products and services from BIREME:

- LILACS. 33 years old, counts on strong indexation criteria. Work is being carried out to have other criteria to complement the data base.
- DeCS. Made up of 219,000 terms. It continues to grow and is fundamental for the description of contents.
- VHL. The entire description and documents are in VHL. This is an accessible model, for recovery, management and the publication of information. It is organized by countries and works based on the priorities of each country. So far there is no federated repository to be able to retrieve the information from each country.
- The VHL Regional portal allows for free access to the different BIREME products. It receives over 20 million hits per year.

- Regarding the VHL, there are dispersed efforts at present. The intention is to strengthen the consolidated entry of information and not rely on independent portals. This effort has been carried out, for example, with Nursing VHL.
- There is ongoing work in consolidating the network of countries and thematic areas. There are more than 100 instances of VHL and over 1200 cooperating libraries.
- There is still much information that is not in VHL, for example, non-conventional information and the information from government agencies. There are some countries that albeit generating a great deal of information have contributed scantily to VHL, Mexico for example.
- It is difficult to measure the impact of VHL on the SDG's. Showing the number of hits does not offer direct information on the impact.
- In terms of the contribution indicators to LILACS made by Cooperating Centers, since the year 2011, the latter have contributed 50,762 documents.
- The national and regional data bases, institutional repositories and non-bibliographic data bases are complementary sources for LILACS and support bibliographic control of literature in Health.
- LILACS counts upon more than 850.000 registers. Only a part of LILACS is on MedLine, MedCarib, Mosaico, PAHO IRIS, Bdenf, Lipecs Sof, Conal. LILACS is being promoted through the visibility of these data bases.
- For the year of 2018 (January – October) the Regional VHL has more than 8 million search sessions. Brazil is the country with the largest number, with more than 6 million. The monthly average reaches 731,197 and there are 445,526 users.
- 11 million VHL registries are in full text (40%). 99.9% of LILACS are entered in full text.
- Regarding the promotion of access and the use of information in health, efforts have been deployed in the culture of information, the translation of knowledge, among other strategies that need to be put in place to consolidate accesses. What has been done mainly are service activities and training of users, the development of face-to-face and virtual courses, the creation of Open Educational Resources (REA) and the participation in exhibition centers in events.
- Each country should work on the promotion of access and the use of information in Health. To think that Bireme alone can do all the work is very difficult.
- In terms of the information search service and the application of information. There has been work with local initiatives, what is missing is to broaden the network of countries and institutions, as there is a lack of full capacity to respond. The drafting of expressions for searches in BVs has been supported and we count upon a repository of such expressions.
- Regarding the translation of knowledge / Synthesis of evidence: We have the Second informative opinion (SOF). It operates at the Telesalud core. This has generated a large data base for primary attention. The process has already been defined, based on: the



selection of SOF potentials, the drafting (matching to the question), evaluation and publication of the information. This is available on VHL Health.

- We also have at hand the evidence dossier – Integrative practices in Health, presenting: a summary or resumé, systematization and available classifications of a practice, care or intervention relating to the MTCI.
- Finally, we have been working on the development of new search models and access to information. For this purpose, the team has worked with co-creation and ideation methodologies.

### Questions and/or comments from the Scientific Committee

Questions and/or comments	Answers
<p>When speaking about the synthesis of information, we lean on decision making. Some difficulties have arisen regarding the quality of reviews.</p> <p>What to do to exert control over this, on the quality of reviews?</p> <p>Cochrane is working on proposals to analyze quality.</p> <p>What is of special concern are the evaluations of technologies. We are working on this with the support from the IDB.</p>	<p>This is a permanent concern. Work has been done to evaluate the quality applying different tools. We are working with the clinical practice guidelines assessed with AGREE, more than 500 guides or guidelines were launched at the congress.</p> <p>We have also been working with McMaster recommendations, how to add and offer this information.</p> <p>The idea would be to organize information by relevance. Despite this, there is another line of action to foster quality;</p>
<p>This is to underscore the synthesis or summary of the 3 main points: knowledge generation, the organization of information and health.</p>	
<p>What is also underscored is the work that has been done; it is positive to hear about the idea to unify the VHL and on the definition of criteria and flows to enter information.</p>	

7) Presentation 4 “*Information Technologies for technical cooperation*”. By Renato T. Murasaki (AFI/MTI BIREME)

- We are urging all to do very much with little.
- We are carrying out management based on governance and the quality of data that support the products. For infometrics, for example.
- We are thinking of a layer for the integration of data to complete the metadata that is not there. Linked Data, as a connection technology.

Actions carried out were presented, keeping in mind the recommendations emanating from the III Meeting of the scientific committee. Some of them are described below:

Regarding the Scientific Committee recommendation: Undertake partnerships. Strengthen governance and collaborative production when developing projects, products and services. Some of the actions have been anticipated.

- VHL-Infobutton. The work is being carried out based on the guides and the framework of the H7 Health Level Seven International, for the development of information exchange protocols. This is joint work with the Italian Hospital of Buenos Aires. Principally based on data referring to the patient’s age, through which it is possible to retrieve information in context.
- e-BlueInfo. Information Platform for Health Practices. It can be found in the different App stores. There are partnerships with the health departments of the Health Ministries of Peru and Brazil. Through this, professionals can obtain quality information to support their work, there are few documents, notwithstanding this, they have top quality and are highly pertinent.

Referring to the Scientific Committee recommendation: Foster the exchange of information among countries on successful projects and experiences; and consider judicialization in health, taking into account individual and collective rights.

- There is a repository of legislation in health. It is in the framework of an initiative called Regula.
- BRISA, Regional Base for the Evaluation of Technologies in Health in the Americas (Base Regional de Informes de Evaluación de Tecnologías en Salud de las Américas). BIREME supports the development of the platform and data management. The base contains 1200 reports.

Regarding the recommendations of the Scientific Committee: Maintain BIREME strengthened as a reference in support for scientific communication

- GIM Coordination - Global Index Medicus. Work has been done on the interoperability between the indices of the WHO regional offices, quality and the GIM metadata and portal.

Regarding the recommendation of the Scientific Committee: Recognize that the information is cross-cutting in the implementations of the SDG’s and compliance with the 2030 Agenda.

- Extension of the DeCS/MeSH. Representation was assessed based on gender, ethnicity, equity and human rights, to extend the terms.

Regarding the recommendation of the Scientific Committee: Evaluate potential, actions and fields of action with a focus on training.

- Repositories of Open Educational Resources (OER). BIREME supports the methodology for the description and technological platform. There is a new interface that offers integrated access to the country repositories.

Regarding the recommendation of the Scientific Committee: Strengthen VHL and LILACS as open access tools to democratize access to information on health.

- Launch of the VHL app: MyVHL.
- Activation of the service for the selective dissemination of information.
- Creation of the Tableau Dashboard with metrics to characterize access profiles. Based on authentication origin, area, gender, academic level, fields of professional performance.

Regarding the recommendation of the Scientific Committee: Develop products for the analysis of scientific production for institutions and/or countries through metrics on impact.

- Panels with indicators on scientific production. This began with the Ministry of Health in Brazil. However, there was the opportunity to extend this throughout the region. It is available at <https://public.tableau.com/profile/bireme/> Based on this, it became possible to create a directory of experts and institutions, based on the data base perspective of indexation. Can we respond to which are the experts that we have based on indexation?

Regarding the recommendation of the Scientific Committee: Evaluate public policies with trends to implement SDG’s 6 and 7; and analyze supply and demand for the creation of multisectoral projects, with health clearly defined and perceived as a common good (Commons).

- Technical cooperation project FUNASA, PAHO/WHO Brazil and BIREME on environmental health and public health engineering. With the Project as a springboard, 4 products were generated:
  - Institutional repository
  - Reports of experiences
  - Thematic VHL
  - Glossary / thesaurus

### Questions and/or comments from the scientific committee

Questions and/or comments	Answers
The projects held up to present are highlighted	

Which are the capacities we count on for the development of products and services?	38 professionals for all managements. A great deal is being done with little. We count on a network of cooperating centers and several strategic partnerships. There has been a marked change.
How is the interoperability and treatment of data managed?	Governance of the data comes about mainly from LILACS, in the quality of the metadata. Mainly open standards are the ones adopted, like JSON. There has also been work on semantic retrieval, based on the technology of Linked Data.
How do you manage the digital preservation of data?	The harvest in terms of preservation is very weak. There has been work done with the producers to enhance this.
How is Bireme's technological infrastructure?	The IT infrastructure is a bit of a challenge for BIREME. There is a combination of the use of open tools with licensed software. The case of Tableau, it has a free license with the commitment of public visibility for the results, in this case in its gallery. Additionally, there is work done with tools for the treatment of data quality, as is done with Tableau Prep.

8) Presentation 5 “*Advances in Scientific Communication*”. By Lilian Caló (COM/DIR BIREME)

Scientific communication

- Selection of experts, for example, to renovate the editorial committee for the Panamerican Journal on Public Health. Searches on databases are carried out for this purpose.
- Analysis and recommendations for journals improvement and indexing in selective databases are made on demand.
- There is an updated matrix on the indexing situation of Latin America and the Caribbean health journals in the main data bases.
- Face to face courses on scientific communication have been offered in a diversity of countries for researchers, editors, health professionals, and graduate students. The courses can be taught in Portuguese, Spanish, English and French.

- An online course on Scientific Communication in Health will be launched by the end of April/2019 in the Spanish language and will be published in the Virtual Campus of Public Health/PAHO.

#### Institutional Communication

- Publication of the BIREME Bulletin, monthly and in three languages.
- Weekly update of the PAHO Intranet page.
- Daily update of the internal Bulletin.
- Management and weekly update of the institutional website.
- Management of social media (Twitter and Facebook).

#### Questions and/or comments from the Scientific Committee

Questions and/or comments	Answers
How has there been support in scientific communication and the management of journals: how is the Open Peer Review perceived?	The topic of journal management is addressed in scientific communication courses. Regarding Open Peer Review, in a few years we will see more development. The role of BIREME is to guide journal editors and show the advantages of working with an open evaluation system.
Which is BIREME's role in open science?	BIREME should participate in the broadening of the discussion and open science topics, as it has done with open access. By providing scientific information in health for all, BIREME still promotes the democratization of knowledge.

#### 9) Presentation 4 “*Advances and Implementation of the Recommendations of the III Session of the Scientific Committee*”. By Diego Gonzalez Machín (DIR BIR)

- The identity and the work of BIREME are acknowledged, as there was agreement in both committees.
- What is pending is the resumption of negotiations for the signature of the Headquarters Agreement, so that annual contributions for the enhancement of the Center can be transferred at the beginning of each fiscal year and directly to BIREME.
- Recommendation: define actions to disseminate the work of the center in the countries. Some work has been done in the country offices, disseminating the BIREME products and services.

- Work has been carried out in 5 of the 8 key PAHO/WHO countries: Honduras, Guatemala, Nicaragua, Haiti and Paraguay.
- Support and promote open access policies through LILACS.
- Strengthen VHL and LILACS as tools for the democratization of access to information on health.
- Develop analysis products for scientific production for institutions and/or countries.
- Count upon partnerships to strengthen governance and the collaborative production of projects, products and services.
- Support open science practices and show the positioning in that sense.
- The regional strategy for the promotion of health is being created. It is geared towards offering information on the experiences that are of interest for the countries.

The scientific committee praises and acknowledges BIREME's commitment in supporting the recommendations and the proper development. The strides obtained during the last year are underscored.

### **Comments and Recommendations**

10) Below there is a highlight of the recommendations from the Scientific Committee members:

Georgiana Marie Gordon-Strachan

- Impressed by all the work
- Disseminate questions from health professionals and the answers. Session on how to deal with this.
- Highlight the use of resources with such a limited staff

Ileana Regla Alfonso Sanchez

- There has been an interest in and adoption of the Committee recommendations, with great professional commitment. Since Infomed there has been joint work with BIREME
- Motivate the use of virtual environments in Cuba. Train
- Gove thrust to thematic libraries. There could be a leap in other specialties
- Knowledge mapping and not only metadata

Mario Guillermo Tristán Lopez

- Recognition of BIREME's work
- The problem is not the lack of access to publications, but access to tools to evaluate the quality of such documents. BIREME does not have the role of doing this analysis, but instead to make available platforms and instruments or tools for this and the evaluation of technologies. An agreement could be made with organization working on this issue. There are tools that can be shared with decision-makers allowing for more expeditious work.

Jaider Ochoa Gutierrez

- It is important to think of open data and platform and replicable research
- Explore new metrics. To this regard, at the University of Antioquia we have been experimenting with several approaches (scientometrics, altimetry, social visibility) and technologies and, at some point, we can cooperate on this
- Continue working on the different open science components.
- Work on mechanisms and tools for digital preservation

Roberto Carlos Pacheco

- Partnerships: how to observe the impact that is being generated with the advanced projects and processes in these partnerships. Cooperation with several sources, betting on interoperability and technological platforms, for example, cooperate with ORCID. Consider the policy actions that have been worked on; for example the National Transformation Plan. There are frameworks for work and cooperation, especially in the strategic sphere; pay attention to this
- Continue working on BIREME's positioning
- Reach to the private sector and commercial sectors for sustainability. How to come closer to these industries? And hence the importance of strategic frameworks. Keep in mind the data regulatory framework

Efren Carlos Oropeza Abúndez

- Faced by the concern over the change of government and financing from this source, it is necessary to shield financial resources so that BIREME can continue to operate
- Democratization of information, Dwell more on open science. It needs to be ever more strengthened and deepened. BIREME should play a protagonist role in this topic.
- Be transparent with the conflicts of interest for open science and scientific communication. Be careful with the way and how this is financed by the editorial business, in case you are working with them.

### **Reactions to the Scientific Committee comments**

Diego González Machín

- There is FENSA, mechanisms to work with private initiatives. A stringent analysis is carried out, in the legal field, to determine if we can work with such initiatives.
- Regarding the conflict of interest, for the organization of the CRICS10 we were very aware of the financing issue, as only public institutions we are already working with were accepted.

Mario Tristán Lopez

- Highlights the issue of the conflicts of interest. We must keep in mind what is happening with the food industry, also including governments.

Georgiana Marie Gordon-Strachan

- I was pleased that BIREME included the extension to society at large.

Carissa F. Etienne

- At PAHO conflicts of interest are considered. We already know what has happened with research on tobacco, fooling the public. Is it impossible to maximize people's health without interacting with the private sector, how to decide with which actors of the private sector to work with, and which not. Work with clear and rigorous conditions. For this reason, WHO declares and eliminates the conflict of interest.
- Our legal department analyzes agreements in detail.

11) Below are the highlights of the address made by the Director of PAHO/WHO Carissa F. Etienne:

- The role of information on the 2030 Agenda should be considered. Today, more than ever, it gains greater importance in the generation of new programs and policies, offers the possibilities for access to information for a healthy life with well-being.
- Bireme has grown based on the contributions of the committees, in this case the Scientific Committee. PAHO must interact with you, the experts.
- Our management stands out for listening and working in a collaborative fashion.
- How can we promote access to universal health, not only in medication but health determinants as well? We have the 3 Ps.
  - Political will. How to get support from governments to implement actions for the health of populations?
  - Public policies. In Latin America, especially in the Caribbean, there is a strong inequality in public policies and they are often not based on evidence. With this, we cannot achieve universal health.
  - Partnerships. How to achieve dialogue with the civil society and the private sector to reach vulnerable groups?
- We lack clarity on the audiences we do not reach and the reasons why we do not reach them. To be the voice of those who have no voice. To have access to scientific publications.
- Transcend to inform the rest of the world. Transform all the evidence into easy to use information. We are undergoing an informational revolution, information should have easy access. For this reason, we have the department that carries out this type of analysis, use of big data and open data to facilitate this task.
- Support to open science and the availability of resources for that on behalf of the states.
- The challenges and reach of BIREME take place at a regional scale. The challenge is to ensure we see information as a special ingredient in the decision-making process.



- It is necessary to have a repository with the publications of the PAHO open access collaborators.

## Other Issues

- 12) Within the framework of Agenda 2030, a proposal is set forth to the members of the Scientific Committee for the “Declaration of São Paulo to favor the democratization of scientific knowledge to attain the Sustainable Development Goals”. This declaration will be presented during the VHL7 prior to CRICS 10 that will be held on 4-6 of December, 2018 in São Paulo, Brazil.
- 13) The members of the Committee and the participants came to a consensus on the recommendations which are summarized below and will be sent for consideration to the PAHO/WHO Director.
  - a. Disseminate questions from health professionals and their answers.
  - b. Incentivize and train using virtual environments.
  - c. To give thrust to the creation of thematic libraries, including specialties for which they have not been developed.
  - d. Knowledge mapping, not only of the metadata
  - e. Make available platforms and tools for the evaluation of the quality of documents, expanding partnerships with organizations working on this issue.
  - f. Think of a platform, for open data and reproducible research.
  - g. Generate partnerships to explore new metric with different focuses on scientometrics, altimetry, social visibility) and technologies
  - h. Continue to work on the different components of open science, strengthening and going more in-depth. BIREME should take a leading role in this issue.
  - i. Work on mechanisms and tools for digital preservation.
  - j. Document the impact that is being generated with the processes and projects developed with other institutions through partnerships
  - k. Cooperation with a diversity of sources, betting on interoperability and technological platform, for example, to cooperate with ORCID.
  - l. Keep in mind the policy actions that are being carried out; for example, the National Transformation Plan. There are frameworks and work in this, especially in the strategic field.
  - m. Continue working on BIREME’s repositioning
  - n. It is necessary to shield financial resources for the ongoing operations of BIREME, this includes coming closer to the private sector and the commercial sector, for sustainability purposes.

- o. Be transparent with the conflict of interest for open science and scientific communication.
- 14) The members of the scientific committee were thanked for their presence, as well as the Director of PAHO/WHO, Carissa F. Etienne, highlighting the discussions held and the results attained during the meeting. The BIREME team was also acknowledge for their efforts at the Center in the field of scientific information in Health, and especially for holding the Fourth Session of the Scientific Committee.

### **Session Adjournment**

After the participants shared comments on their appreciation for and experiences at the meeting, the main objectives reached towards the new institutional positioning of the Center were pointed out and the fourth session was then closed.

In witness whereof, the Fourth Session of the Scientific Committee of the Latin American and Caribbean Center on Health Sciences Information (BIREME), the Chairman of the Meeting and the expert delegate in scientific communication from Mexico, and the Director of BIREME, *ex officio* Secretary, adjourned the session and signed this final report in its original Spanish language.

Drafted in São Paulo, Brazil, on the third day of the month of December two thousand eighteen.

The original signed document will be filed in the archives of the Pan American Sanitary Bureau.

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Efren Carlos Oropeza Abúndez (Mexico)  
Chair of the fourth session of the BIREME/PAHO/WHO  
Scientific Committee

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Diego González Machín  
Director of BIREME/PAHO/WHO  
*ex officio* Secretary of the fourth session of the BIREME/PAHO/WHO  
Scientific Committee

Annexes

Annex A

## **Agenda**

### **Opening of the Session**

Presentation by the *ex officio* Secretary who highlighted the technical cooperation program at the Center, its projects, products and services available for the countries of the Region (and outside of it, as well) in the local, national, regional and global spheres.

### **Debate, questions and answers**

Institutional, strategic, normative and policy documents, and the potential role of BIREME:

- Establishment of a New Institutional Framework for the Latin American and Caribbean Center on Health Sciences Information (BIREME), Resolution approved in the 49<sup>th</sup> Board (CD49.R5), held at the Headquarters of PAHO between September 28<sup>th</sup> and October 12<sup>th</sup>, 2009
  
- Biennial Work Plan (BWP) of BIREME 2018-2019

## Annex B

### **LIST OF DOCUMENTS**

#### **Work Documents**

1. Agenda for the Fourth Session of the BIREME Scientific Committee
2. List of Participants
3. BIREME Executive Report
4. Statute “Establishment of a New Institutional Framework for the Latin American and Caribbean Center for Information on Health Sciences (BIREME)”, CD49.R5
5. Terms of Reference of the BIREME Scientific Committee
6. Internal Rules of the BIREME Scientific Committee
7. Biannual Work Plan of BIREME 2018-2019
8. Final Report for the Third Session of the BIREME Scientific Committee

Note: Reports of the sessions and the documents were handed out on a pen-drive offered by BIREME/PAHO/WHO at the meeting.

## Annex C

### **LIST OF PARTICIPANTS**

#### **MEMBERS OF THE SCIENTIFIC COMMITTEE**

Efrén Carlos Oropeza Abúndez, Scientific Communication. Mexico

Georgiana Marie Gordon-Strachan, Scientific Research. Jamaica

Ileana Regla Alfonso Sanchez, Information Management. Cuba

Jaider Ochoa Gutierrez, Education and Information Management. Colombia

Mario Guillermo Tristan Lopez, Scientific Research. Costa Rica

Roberto Carlos Pacheco, Knowledge engineering and Information Systems. Brazil

#### **PAHO/WHO Headquarters**

Carissa F. Etienne. Director

#### **Observer**

Amanda J. Wilson. Coordination of the National Network, Library Operations  
US National Library of Medicine (NLM)

#### **BIREME/PAHO/WHO**

Diego González Machín, Director and *ex officio* Secretary

DIR – Center Director

Lilian N. Calò Scholarly Communication and Institutional Communication Coordinator

Carmen Verônica M. Abdala, Manager

PFI/SCI – Cooperative Services in Information and Production of Information Sources

Renato T. Murasaki, Manager

AFI/MTI – Manager of Methodology and Information Technologies and Management of  
Information Sources

Marcos Mori, RST Supervisor

Silvia Almeida de Valentin, Manager

GA – Administrative Management and Planning

Marcia Ymanaka Barretto, IT Coordinator

Adriano Rehder de Sá, Controller

Annex D

**ACRONYMS USED IN THIS REPORT**

<b>BIREME</b>	Latin American and Caribbean Center on Health Sciences Information
<b>VHL</b>	Virtual Health Library
<b>CD49</b>	49 <sup>th</sup> Session of the PAHO/WHO Directing Council
<b>CD49.R5</b>	Resolution 5 of the 49 <sup>th</sup> PAHO/WHO Directing Council
<b>CD52</b>	52 <sup>nd</sup> PAHO/WHO Directing Council
<b>CD52.R8</b>	Resolution 58 of the 52 <sup>nd</sup> PAHO/WHO Directing Council
<b>CRICS</b>	Regional Congress on Health Sciences Information
<b>CSP29</b>	28 <sup>th</sup> PAHO/WHO Pan American Sanitary Conference by
<b>CSP29.R2</b>	Resolution 2 of the 29 <sup>th</sup> PAHO/WHO Pan American Sanitary Conference
<b>DeCS</b>	Health Sciences Descriptors
<b>LILACS</b>	Latin American and Caribbean Literature in Health Sciences, main regional bibliographic data base of BIREME