



# Biennial Report

2019 - 2021

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President 2019-21

**Dr. Naveen Thacker**

Executive Director 2019-21

## International Pediatric Association

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# INTRODUCTION

This report covers two years (2019-2021) and is divided into three sections:

- Governance and Administration of the International Pediatric Association (IPA)
- Activities and Accomplishment of the International Pediatric Association (IPA)
- IPA Financial Reports

There will be time allotted for discussion of this report during the scheduled meeting of the Council of Delegates to be held virtually on 08th May 2021. We welcome comments or questions from members before that time.

## I. GOVERNANCE AND ADMINISTRATION OF THE INTERNATIONAL PEDIATRIC ASSOCIATION (IPA)

The Council of Delegates represents the total membership of the IPA and is the ultimate governing body of the IPA. Members of the Council of Delegates are the Presidents of each IPA Member Society or the official society representative designated to fill this role. The Council of Delegates meets during the IPA Congress. The 2021 Council of Delegates will have Members from 147 National Member Societies, 7 Regional Societies, and 10 International Specialty Societies from 143 Countries.

The IPA Standing Committee acts on behalf of the Council of Delegates and guides IPA policy and action based on the wishes of the Council of Delegates. The IPA Executive Committee is composed of the IPA officers (President, President-Elect, Congress President, Executive Director, Treasurer, Coordinator, and Past President as ex-officio) and two Standing Committee members are elected to represent the Standing Committee to the Executive Committee. The role of the Executive Committee is to carry out the mandates of the Standing Committee and to act on behalf of the Standing Committee between its regular meetings. Under provisions of the IPA Constitution, the Executive Committee will have eight members plus one ex-officio member.

## 1.1 THE COUNCIL OF DELEGATES IN PANAMA, MARCH 2019

The 2019 Council of National Delegates met in Council of National Delegates Sessions 33 and 34 in Panama 18-19, March 2019.

### **IPA Council of Delegates Session 33, 18<sup>th</sup> March 2019**

On 18<sup>th</sup> March 2019, The Council of Delegates was welcomed and called to order by Dr. Bhutta at 10:18 AM. Dr. Keenan called roll and a quorum was established.

The COD adopted by majority vote the following resolutions on 18<sup>th</sup> March 2019 in Panama.

**CD Resolution:** The agenda was adopted.

**CD Resolution:** 2016-2019 Triennial and Financial Report was adopted.

Review of policies and strategic plans of the IPA

New IPA Membership Applications were presented for national societies of Palestine, Kosovo, and Montenegro, and for international specialty societies, the International Association for Adolescent Health and the World Federation of Pediatric Intensive and Critical Care Societies. The applications were approved and the societies will be seated as delegates.

Dr. Thacker introduced discussion regarding information and an application received from the European Academy of Pediatrics. There was extensive discussion. It was moved and adopted that EAP be accepted as a member of IPA and the European societies are asked to resolve their representation on the standing committee within 6 months

Dr. Keenan reviewed the election procedures.

Those candidates that were uncontested and or regional president seats were approved by acclamation and Drs. Amorissani-Folquet, Ndiaye, Pulungan, Hasanoglu, Revelo Castro, Alonso, Haddad, McMillian, and Arnold were congratulated on their election. The five International specialty society's nominees were also approved by acclamation and Drs. Mercer, Forsyth, El-Shabrawi, Sigalet and Koletzko were congratulated on their election.

Variability in communication from regional and national societies regarding nominations were discussed.

For Standing Committee Election the elections for the APPA and UAPS regions were conducted and Drs. Shastri, Nakamura, Ismail, and Mohamed were elected to the standing committee and were congratulated on their election. (See section 1.2 for list of SC members 2019-2021).

One standing committee member for Europe was elected by acclamation and Dr. Namazova was congratulated. One seat remains vacant. The European regional society presidents were encouraged to resolve and propose a way forward together overnight.

The selection of Dr. Viner as president of the Glasgow Congress in 2021 was approved by acclamation.

Dr. Bhutta reviewed the plan for the second Council of Delegates meeting

Adjournment at 12:40 PM

### **IPA Council of Delegates Session 34, 19<sup>th</sup> March 2019**

At Council of National Delegates Session 34 on 19<sup>th</sup> March 2019, Dr. Bhutta called the meeting to order at 10:16 AM and thanked the delegates for the first day's meeting. Dr. Keenan called the roll call.

The following business transpired:

Drs. Namazova and Hadjipanayis reported on an agreement between the EPA and EAP and reported on this to the delegates and will proceed in accordance with the agreement from Moscow in 2017.

**CD Resolution:** Dr. Hadjipanayis will take the 2<sup>nd</sup> European seat on the Standing committee for the 2019-21 term representing the Cyprus pediatric society. This decision was welcomed and approved by Council of Delegates unanimously.

**CD Resolution:** Dr Enver Hasanoglu was elected as the President Elect of The IPA for the year 2019-2021.

For Selection of Meeting Site for 2023 IPA Congress, Dr. Bhutta described the modifications proposed which will change conference session selection to a ranking of sites in order to allow selection of venues to be managed by the Executive committee to ensure that commitments made are valid and actionable in site selection.

**CD Resolution:** India is selected as the site for IPA 2023 Congress

Dr. Zulfiqar Bhutta informed the house that due election process was conducted by Standing Committee and following officers were elected for the term 2019-2021.

Dr. Naveen Thacker - Executive Director, Dr. Jay Berkelhamer – Treasurer and Dr. Jonathan Klein – Coordinator of Development. Dr. Errol Alden was elected as President Elect in Council of delegates Session 32 at Vancouver, Canada and he will take over as president IPA at the end of this congress.

The President Elect, Dr. Alden announced that the first meeting of the standing committee would immediately follow the closing session on Thursday March 21, 2019. He thanked Dr. Bhutta and Dr. Keenan, the outgoing Executive Committee members, and all of the candidates for their service and led the delegates in applause for their work for IPA and children. He announced that Dr. Keenan would become President of the IPA Foundation and invited all delegates to the Alumni Reception on Wednesday evening.

Dr. Bhutta announced that there would be no third council of Delegates meeting, and encouraged people to attend the scientific sessions

Adjournment at 12:48 PM

## **1.2 STANDING COMMITTEE 2019-2021**

### **IPA Executive Committee (also members of Standing Committee) 2019-2021**

Errol Alden, USA

Enver Hasanoglu, Turkey

Zufiqar Bhutta, Canada

Naveen Thacker, India

Jay Berkelhamer, USA

Jonathan Klein, USA

Russell Viner, UK

Joseph Haddad, Lebanon (UAPS)

Aman Pulungan, Indonesia (APPA)

## **IPA Standing Committee 2019-2021**

Digant Shastri, India( APPA)

Zulkifli Ismail, Malaysia (APPA)

Yasuhide Nakamura, Japan (APPA)

Linda Arnold, USA (AAP)

Douglas Donald Mcmillan, Canada (CPS)

Oswaldo Revelo Castro, El Salvador (ALAPE)

Carlos G Alonso, Mexico (ALAPE)

Amah Madeleine Amorissani Folquet, Ivory Coast (UNAPSA)

Ousmane Ndiaye, Senegal (UNAPSA)

Douagi Mohammed, Tunisia (UAPS)

Leyla Namazova, Russia (EPA/UNEPSA)

Adamos Hadjipanayis, Cyprus (EAP)

Mansour Bahrami, Iran (UNPSTR)

Raul Mercer, Argentina (ISSOP)

Mortada El Shabrawi, Egypt (ISTP)

Kevin Forysth, Australia (IPALA)

Berthold Koletzko, Germany (FISPGHAN)

David Sigalet, Qatar (WOFAPS)

William Keenan, USA (Ex-officio)

## THE COUNCIL OF DELEGATES (VIRTUAL MEETING), MAY 2021: SESSION 35

Due to the pandemic situation, the IPA Standing Committee decided to postpone the IPA Congress 2021 at Glasgow to 2025 and decided to hold a virtual COD meeting on 08th May 2021 to conduct important business. During the virtual COD meeting, certified voting delegates will meet to review and ratify the biennial report, policies and strategic plans for the IPA, presentation of new IPA Membership Applications, review of Election Procedure. The COD will hold the elections for the President-Elect and Standing Committee for the term 2021-2023.

As the next two IPA congresses are in place for 2023 and 2025, IPA is not accepting a bid for the future congresses.

### Virtual Council of Delegate Meeting

08<sup>th</sup> May 2021, 07:00 AM Chicago Time

Time	Agenda Items
07:00-07:02 am	Welcoming Remarks <i>Errol Alden, President 2019-2021</i>
07:02-07:17 am	Roll Call and Establishment of Quorum <i>Naveen Thacker, Executive Director 2019-2021</i>
07:17-07:32 am	Presentation & Approval of Biennial report <i>Errol Alden, President 2019-2021</i>
07:32-07:42 am	Introduction & Technical Orientation to Voting Process <i>Presented by Election Committee</i>
07:42-08:02 am	Keynote Address <i>Zulifiqar Bhutta, IPA Past President</i>

08:02-08:07 am	President Elect Candidate Speech <i>Naveen Thacker</i>
08:07-08:10 am	Open Questioning of the Candidate <i>Moderated by Election Committee</i>
08:10-08:20 am	Presentation of Brief Bio of SC Candidates <i>Presented by Election Committee</i>
08:20-08:25 am	Open questions for SC Candidates <i>Moderated by Election Committee</i>
08:25-08:55 am	Introduction of 2021-23 IPA President & Open Interactive Discussion on Future Goals & Priorities of IPA <i>Enver Hasanoglu, President 2021-2023</i>
08:55-09:15 am	Voting & Away from Keyboard Break
09:15-09:25 am	Presentation & Approval of New IPA Membership Applications
09:25-09:30 am	IPA Congress 2023 President Election
09:30-09:35 am	Invitation to IPA Congress 2023, Ahmedabad by IAP
09:35-09:45 am	Announcement of IPA Election Results & <i>Presentation of New Office Bearers</i>
09:45-09:55 am	Any Other Business
09:55-10:00 am	Adjourn



## ELECTION OF THE IPA PRESIDENT-ELECT

The Election Committee which is headed by Dr William Keenan received only one nomination for the position of President-elect as stipulated by the Constitutional bylaws, requiring approval of the candidate's National Pediatric Society, nomination by three Member Societies, and representation of a region from which no President-elect has been elected during the two preceding three-year terms.

According to the IPA Constitution amendment, the President-elect, after one two-year term (2021- 2023), will assume office as President for one two-year term (2023-2025).

The following candidate for IPA President-elect 2021-2023 has been duly nominated:

- Dr Naveen Thacker (India)

## ELECTION OF THE IPA STANDING COMMITTEE 2021-2023

The IPA Constitution recognizes seven geographic regions: Sub-Saharan Africa, Asia, Central Asia, Europe, Latin America, Middle East & North Africa, and North America. For each of these regions, if there is a functioning Regional Society inclusive of the entire region, the President of that Regional Society will be accorded a seat on the IPA Standing Committee after endorsement by the council of delegates. Each of these regions must also nominate two or more candidates to stand for election by the CD to the second Regional Seat on the SC, and in the case of APPA for the second, third, and fourth Regional Seats on the SC.

Regional nominations put forth by the IPA geographic regions have been reviewed by the IPA Election Committee and Standing Committee respectively. Regional candidates, with the nominating society, are:

### **Africa (sub-Saharan)**

- Dr. Amah Madeleine Amorissani Folquet, (Ivory Coast) Union of National African Paediatric Societies and Associations - UNAPSA will hold the seat of the Regional President after endorsement by the Council of Delegates

#### **Candidates for the second regional seat are:**

- Dr. John Adabie Appiah, (Paediatric Society of Ghana)
- Prof. Ousmane Ndiaye, (Senegalese Pediatric Society)

## Asia Pacific

- Dr Aman Pulungan, (Indonesia) Asia Pacific Pediatric Association- APPA will hold the seat of the Regional President after endorsement by the Council of Delegates

### **Candidates for second regional seat is**

- Prof Manzoor Hussian, (Bangladesh Pediatric Association)
- Assoc. Prof. Nitin Kapur, (Royal Australasian College of Physicians)
- Prof Yasuhide Nakamura, (Japanese Pediatric Society)
- Dr Bakul Parekh, (Indian Academy of Pediatrics)
- Prof Muhammed Ashraf Sultan, (Pakistan Pediatric Association)

## Central Asia

- Prof. Koray Boduroglu, (Turkey) Union of National Pediatric Societies of Turkish Republics - UNPSTR will hold the seat of the Regional President after endorsement by the Council of Delegates

### **Candidate for the second regional seat is**

- Dr. Mansour Bahrami, (Iranian Society of Pediatrics)

## Latin America

- Dr. Oswaldo Revelo Castro, (El Salvador) President of Asociación Latinoamericana de Pediatría (ALAPE) will hold the seat of Regional President after endorsement by the Council of Delegates

### **Candidate for the second regional seat is**

- Dr. Carlos G Alonso (Confederación Nacional de Pediatría de México)

## Middle East & North Africa

- Dr. Joseph Haddad, (Lebanon) President of Union of Arab Pediatric Societies (UAPS) will hold the seat of the Regional President, after endorsement by the Council of Delegates

### **Candidate for the second regional seat is**

- Dr. Abdulsalam Abu-Libdeh (Pediatric Society – Palestine)

## Europe

As per the Istanbul SC meeting resolution on 23-24 November 2019, it was decided to allocate SC seat to each European societies, resolution quoted below:

## SC Meeting Resolution 23-24 November Istanbul 2019

### European Representation:

Dr Alden reviewed the issues regarding representation by EPA and EAP and the lack of these organizations have come to a solution on their own. Dr Alden on behalf of the Executive Committee recommended that one SC seat be allocated to each of the two European societies Glasgow congress onwards. Further, modalities regarding nomination/election will be discussed and decided by EC of IPA. Moved by Dr Viner; Seconded by Dr Haddad. Passed unanimously. Dr Hadjipanayis thanked the SC on behalf of EAP and expressed EAP's commitment to collaboration with all of the European societies.

Accordingly, two candidates from Europe have been nominated by the two regional Societies of Europe:

- Prof. Leyla Namazova-Baranova, (European Paediatric Association, the Union of National European Paediatric Societies and Associations (EPA/UNEPSA))
- Prof. Adamos Hadjipanayis, (European Academy of Paediatrics (EAP))

### North America

There is no single representative North American Regional Society, two candidates from North America have accordingly been nominated by the two Member Societies of North America:

- Dr. Sam K. Wong, (Canadian Paediatric Society)
- Dr. Kyle E. Yasuda, (American Academy of Pediatrics)

### International Specialty Societies

Five candidates from the IPA specialty member societies will be elected to the IPA SC from a slate of candidates proposed by the six IPA member specialty societies which decided to nominate. These candidates include:

- Dr. Kevin Forsyth, International Pediatric Academic Leaders Association (IPALA)
- Prof. Berthold Koletzko, The Federation Of International Societies of Paediatric Gastroenterology, Hepatology and Nutrition (FISPGHAN)
- Dr. Raúl Gerardo Mercer, International Society For Social Pediatrics and Child Health (ISSOP)
- Prof. Susan M. Sawyer, International Association For Adolescent Health (IAAH)
- Prof. Mortada El-Shabrawi, International Society Of Tropical Pediatrics (ISTP)
- Prof. Sameh Shehata, World Federation Of Associations of Paediatric Surgeons (WOFAPS)

Note: If representatives of International Pediatric Academic Leaders Association (IPALA) and World Federation of Associations of Paediatric Surgeons (WOFAPS) are not elected as SC members by Council of Delegate, then as per the IPA Constitution (quoted below) the SC may invite these representatives as non-voting members of the SC.

4.8.1. In additions, the SC may invite representatives of other pediatric organizations as non-voting members of the SC. These shall include representatives of the World Federation of Pediatric Surgeons and the International Pediatric Chairs Association if representatives of these Member International Pediatric Specialty Societies are not elected to the SC.

### **Final Composition of the IPA SC 2021-2023**

The 2021-2023 Standing Committee (SC) will have 28 members:

- 12 members representing each of six of the seven geographic regions (2 each) and 4 members representing APPA region
- 5 members representing the IPA specialty member societies
- 7 additional members of the IPA Executive Committee (IPA Officers and Executives and the President of the IPA Congress and IPA Past President)

### **1.3 EXECUTIVE COMMITTEE 2021-2023**

The composition of the IPA Executive Committee (EC) 2021-2023 will include:

- President (Enver Hasanoglu,)
- President-elect (to be elected by the Council of Delegates)
- Executive Director (Aman Pulungan, elected by SC February 2021)
- Treasurer (Jonathan Klein, elected by SC February 2021)
- Coordinator (Linda Arnold, elected by SC February 2021)
- President of the IPA Congress, Ahmedabad, India (to be endorsed by COD)
- Two members of the 2021-2023 Standing Committee ( to be elected to the 2021-2023 SC to represent the 2021-2023 SC to the 2021-2023 Executive Committee)
- Immediate Past President (Errol Alden)

### **1.4 NATIONAL SOCIETES TO BE OFFICIALLY CONFIRMED AS IPA MEMBER SOCIETIES**

- Paediatric Association of the Gambia
- Societa Italiana Pediatria Ospedaliera
- Mongolian Academy of Pediatrics

## **1.5 SPECIALTY SOCIETIES TO BE OFFICIALLY CONFIRMED AS IPA MEMBER SOCIETIES:**

- World Society for Pediatric Infectious Diseases

## **1.6 ADMINISTRATIVE OFFICES OF THE IPA**

In March 2019, as Dr Naveen Thacker succeeded Dr William Keenan as IPA Executive Director, as previously decided by the IPA Executive Committee, the administrative office was moved from Webster Forest Drive, USA to Gandhidham, India. The Executive Director's office has been responsible for coordinating activities of the IPA Admin office, supporting the President and other officers, supporting the Technical Advisors, advising on member relations, and organizing agendas, oversight, and preparing minutes of the Standing and Executive Committee meetings and the Council of Delegates meetings.

As Dr. Errol Alden took the presidency, the President office also shifted from Toronto, Canada to 9804 Voss Road, Marengo II, USA. The President has represented the IPA at many global and national meetings, conferences, and workshops.

Treasurer Dr. Jay Berkelhamer works from his office in Atlanta, USA. He has provided oversight of budget, expenditures, and bank accounts, and has worked with the Executive Director in the preparation of IPA financial reports.

Coordinator of Development Dr. Jonathan Klein works from his office in Chicago and has managed the IPA External relations with WHO, UNICEF etc. and SAG activities.

Dr. Digant Shastri, IPA website coordinator and Dr. Aman Pulungan and Dr. Somashekhar Nimbalkar as social media coordinators for Instagram and Twitter, respectively, were appointed to support the Executive Director office. The IPA quarterly Newsletter is supported by the IPA under the editorship of Dr Deepak Kamat and Dr. Zulkifli Ismail. As Dr. Kamat stepped down from the post of Editor in Chief, Dr. Ismail was appointed as the same by the Standing Committee.

## 2. ACTIVITIES AND ACCOMPLISHMENTS 2019-2021

The Executive Director's Office manages the following activities.

- 1) Day to day and strategic communication with IPA member societies
- 2) Dues notices to member societies and issuing the receipt
- 3) To arrange face to face meetings and conference call of IPA EC/SC
- 4) To prepare minutes of IPA EC/SC meetings
- 5) Following up on action items, work plan
- 6) IPA website development & updating
- 7) Managing IPA social media handles
- 8) IPA Newsletter
- 9) IPA campaigns and Surveys
- 10) IPA elections notices, collecting nominations, CVs, Col, Voting delegate lists
- 11) To coordinate with IPA Sub Committees of SCs

By the end of the year 2019, IPA was able to achieve the following with a vision to reach out to each member society.

- Able to contact member societies, whose contact information were missing earlier, with the help of Executive Committee and Standing Committee members
- Promptly serve the needs of member societies with the help of efficient and lean administrative structure
- Successful in launching of "Online Payment" feature on our website for the member societies to make their annual membership payment through credit/debit card
- Making the IPA networking much broader and stronger than before because the member societies are the backbone and received requests from many other member societies around the globe to be a part of IPA
- Partnering with the organizations globally (WHO, PMNCH, ICM, FIGO, GAVI) to make sure children's voice is heard across the globe
- Enhancing our communication through social media (Twitter, Facebook, Instagram, LinkedIn, and YouTube) and our website
- Able to create the IPA archive, and have digitized all the old documents for easy access

The year 2020 with the COVID-19 pandemic has created a new normal world, which has affected our work and personal lives. This pandemic brought changes to IPA too but IPA did not stop! As the saying goes, **"In every adversity lies an opportunity"** is true in this current scenario. IPA accepted the changes with zeal and overcame the challenges. IPA recognized that COVID 19 has

accelerated the digital transformation. IPA too incorporated new approaches like virtual meetings and online webinars to reach out and cope with the current scenario.

- IPA conducted 20 EC calls and 5 SC calls were conducted via Zoom meetings
- IPA hosted 7 webinars in English, 5 webinars in Spanish and 4 webinars in French which addressed the needs of children and adolescents during the pandemic of COVID-19 disease caused by SARS-CoV-2 Coronavirus. The webinar series has focused on content that addresses priorities that were identified by IPA leadership and by UNICEF I. Many of these webinars were during the odd hours due to the time zone differences and the IPA Executive Director office staffs have to work overtime and at odd hours to cope up with the situation.
- The webinars are archived on the IPA YouTube Channel:  
<https://www.youtube.com/channel/UCdILbZMM7LvMkXbTJwjRtQ>

Each session included several IPA technical experts, along with speakers from WHO and UNICEF. To date, these sessions have been viewed more than 35,000 times by audiences in more than 75 countries.

- With the introduction of COVID 19 vaccines, IPA conducted a Solidarity campaign in support of COVID 19 vaccines. The campaign was supported by pediatric leaders across the world. 30 members from 22 countries have recorded their one-line video message. Out of the 30 members, 11 members were IPA Alumni.
- IPA successfully created a Whatsapp group to bring IPA Alumni together.

IPA has been actively using its social media handles. Till date we have 6.08k subscribers on YouTube, 3.5k Followers on Twitter, more than 12k Followers on Facebook and more than 1k Followers on Instagram.

## External Relations:

### Report on the Global Coalition to end Sickle Cell Disease 2019-2021

The Coalition includes founding members - NIH, Department of Health and Human Services, CDC, USAID, WHO, UNICEF, and the World Bank led by the office of the Assistant Secretary for Health.

The Objective is to enable the development of national plans for a basic scalable sickle cell program designed to reduce childhood mortality and morbidity.

Errol Alden and Janna Patterson are co-chairs of the Education committee. Adenike Grange and Madeleine Amorissani Folquet are the IPA representatives. As the personnel has changed in the Assistant Secretary for Health office there has been a pause in activity. However, a regional webinar regarding Sickle Cell disease has been proposed and is awaiting funding.

### **Report on IPA -PMNCH and UN Agency Relations**

The Partnership for Maternal Newborn and Child Health is the world's largest alliance for women, children and adolescent health bringing together over 1000 organizations across 192 countries. Members are grouped into one of 10 constituencies. The IPA is in the Health Care Professional Associations, which includes FIGO, IPA, Midwives, Neonatal Nurses COIN and the International Nurses Association. Dr. Errol Alden is the chair of the HCPA constituencies and represent the IPA on the board of the PMNCH having replaced Zulfiqar Bhutta in January of 2021.

The PMNCH recently reorganized and in its 5 year strategy for 2021-2025, will focus on three areas of work:

- 1) Maternal Newborn and Child Health prioritizing SDG 3 and 4
- 2) Sexual and Reproductive Health and Rights
- 3) Adolescents

Dr. Jonathan Klein serves as the Executive Committee's focal point for IPA relations with WHO and other UN agencies. The focal point activities consisted of updating the IPA triennial plan with the World Health Organization, establishing and maintaining IPA as a Civil Society member recognized by the UN Economic and Social Council, engaging regional, SAG, and national leaders in global and regional UN Agency and technical consultations.

### **Strategic Advisory Groups**

In advance of the Panama 29th IPA Congress, President Dr. Alden reviewed the activities of each Strategic Advisory Group (SAG). SAG leaders were recognized for their contributions and an evaluation of priority areas was undertaken. SAG Chairs were appointed or reappointed for two-year terms (2019-2021) by Dr. Alden with the approval of the Standing Committee. Each SAG chairperson present at the 2019 Congress was asked to develop an agenda to convene SAG members and include an opportunity for those members of the Council of Delegates and Standing Committee interested in the SAG content area. Leads were asked to develop a plan addressing SAG membership, partnerships with other relevant stakeholders, policy activities for



national societies and/or UN agencies, and educational priorities or curriculum activities for national societies.

A summary follows of the key areas of focus identified, the SAG Leaders named to provide expertise in this area, and the activities and recommendations that emerged.

**Adolescent Health:** SAG Lead: Susan Sawyer (Australia)

This SAG is devoted to furthering the adolescent health agenda through global partnerships and identifying opportunities for collaboration. Dr. Sawyer serves as President of the International Association for Adolescent Health (IAAH). IAAH became a member society of IPA in 2019. The SAG has focused on partnership with WHO and the Lancet Commission on Adolescent Health, is addressing adolescent health clinical training curricula issues, and is actively promoting the PMNCH-led advocacy for the Call to Action for Adolescent Well-being. IPA member society input was also sought for a survey of young people sponsored by UN Major Group on Children and Youth and others on the impact of COVID-19 on education and employment.

**Child Rights Committee:** SAG Leads: Leyla Namazova (Russia) & Raúl Mercer (Argentina)

This SAG is devoted to furthering initiatives and advocacy efforts for child rights globally through partnerships and opportunities for collaboration. The SAG works closely with the International Society for Social Pediatrics and Child Health on issues affecting violence against children, and through Child Rights educational activities via publications and policy efforts. SAG members participated in a meeting with UNICEF and Medicine Sans Frontiers on children in refugees and conflict settings in advance of the Istanbul Standing Committee meeting. They are actively addressing the consequences and mitigation of armed conflict on children, border/refugee migration, breast milk Supplement Company funding of scientific journals, and global climate change. SAG members contributed to the Pediatrics article on The Rights of Children for Optimal Development and Nurturing Care.

**Children and Disabilities:** SAG Lead: Joseph Haddad (Lebanon)

This SAG defined the policy goal for IPA to be “a world in which all persons and families live in dignity with equal rights and opportunities and able to achieve their full potential” and advocacy for these goals with the pediatric community and externally, with the inclusion of children with special needs throughout the SDGs - particularly education, employment, equality, and data collection and monitoring (SDG#s 8, 10, 11, 17). Dissemination has included pediatric society meetings and regional symposia addressing needs in Francophone Africa, as well as social media and the IPA/UNICEF/WHO webinar series. Despite the catastrophic destruction of Dr. Haddad’s hospital in Beirut in August 2020, he also provided coordination and leadership for the IPA/UNICEF/WHO webinar series on Children and COVID-19.

### **Children in Humanitarian Emergencies:** SAG Lead: Daniel Martinez (Mexico/ MSF HQ- Geneva)

This SAG is focused on developing capacity and making more resources and tools available for practitioners and policymakers and pediatricians who are in the field faced with the challenges of humanitarian crises, and refugee and displaced populations through partnerships and global in-country collaborations. Through the partnership with Doctors without Borders/Medicine sans Frontiers, they have linked IPA as a partner in MSF's pediatrics in disasters workshop being planned for April 2021 and is working to develop a 1-2 year curricula on Humanitarian Pediatrics as a fellowship for pediatric or general physicians. They have also helped organize webinars addressing children and COVID in humanitarian settings in French, English and Spanish, and contributed to the IPA's publication on children and COVID19. In coordination with Dr. Alden and the EC, SAG members helped plan and lead the meeting with UNICEF and Medicine Sans Frontiers on children in refugees and conflict settings in advance of the Istanbul Standing Committee meeting.

### **Early child development:** SAG lead: Mohamad Mikati (USA)

This SAG is devoted to furthering the initiatives and discussion on early child development (ECD) programming and research globally through partnerships and opportunities for collaboration. They have worked with other SAG Leaders and IPA Sub-Committee Chairs to advance discussions on ECD initiatives and neurodevelopment indicators in the first 1,000 days. SAG members are developing scientific reviews and white papers on WHO's nurturing care and early childhood development framework, child development, and the role of pediatricians and pediatric societies in implementation. SAG members actively participated in consultations with WHO and UNICEF regarding developmental considerations around mask-wearing in young children as a COVID-19 transmission measure. SAG members contributed to the 2019 Pediatrics article on The Rights of Children for Optimal Development and Nurturing Care (Uchitel J, Alden E, Bhutta ZA, et al. Pediatrics. 2019;144(6): e20190487). They contributed to the WHO "Monitoring children's development in primary care services" conference in June 2020, and are preparing a second article "The Role of Pediatricians in Ensuring Optimal Early Childhood Development Globally". They also participated with the International Child Neurology Association and others on the development of an Intersectoral Global Action Plan (IGAP) on Epilepsy and Other Neurological Disorders for consideration by the World Health Assembly in 2022.

### **Education and Workforce:** SAG leads: Kevin Forsyth (Australia) & Christiana Russ (USA)

This SAG is conducting a series of surveys of pediatric education leaders to explore key principles that underpin pediatric training and the obstacles and challenges in ensuring that pediatric training is to the standard leaders expect. They also planned to develop a year-long global Child Health Leadership Academy in partnership with the UK Royal College of Pediatric and Child Health, however, funding was not able to be secured. Additional policy work planned includes a

comparative analysis of accreditation processes for pediatric postgraduate training and the development of a framework for analyzing the child health workforce based on the health needs of children.

**Environmental health:** SAG lead: Ruth Etzel (USA)

This SAG developed a new IPA Statement about responding to the impact of climate change on children to provide information about climate change that national societies may use in their educational programs. The SAG assisted WHO in updating the Training Package on Children's Environmental Health (posted on the WHO website [www.who.int/ceh/capacity/training\\_modules/en/](http://www.who.int/ceh/capacity/training_modules/en/)) which includes training modules on Why children, Children are not little adults, Pediatric Environmental History, Sanitation and Hygiene, E-waste, Mercury, Chemicals, Second-hand Tobacco Smoke, Ambient Air, and Climate Change. Accompanying materials include information on how to organize and evaluate a training event. The SAG appointed 9 new Environmental Health Advocates, and engaged SAG members and advocates in tracking selected SDG indicators on urban air pollution (SDG Indicator 11.6.2); Access to clean fuels for cooking (7.1.2); Safe drinking water (6.1.1); and Integration of climate change into national policies (13.2.1). Planning is underway for an IPA Environmental Health Leadership Institute in 2021. The SAG is working with the Global Climate and Health Alliance and the WHO-Civil Society Working Group on Climate and Health to develop input for the United Nations Framework Convention on Climate Change 26th Conference of Parties meeting in 2021.

**HIV and TB:** SAG leads: Madeleine Amorissani Folquet (Cote d'Ivoire) & Rajeshwar Dayal (India)

This SAG focuses IPA attention on two infectious diseases that are important to child survival and health. SAG members represented IPA in several settings, including global scientific congresses on lung health, WHO regional consultations on TB in High Burden and Priority Countries, and WHO sponsored webinars. Dr. Amorissani Folquet also assumed a major role in helping coordinate the French webinar series in the IPA/UNICEF/WHO project addressing children and COVID-19.

**Immunization:** SAG leads: Naveen Thacker (India) & Walter Orenstein (USA)

This SAG has a central mission of promoting the validity and importance of vaccination in children globally through partnership and opportunities for collaboration. Dr. Thacker has worked to identify ways to challenge the current status of vaccine hesitancy globally. SAG leaders participate in several WHO and GAVI advisory groups and lead IPA's WHO collaboration plan goal to provide leadership and policy advice to national pediatric societies to build the nationwide value of vaccines messaging for the public, media, politicians and other decision-makers. The IPA Vaccine Trust project addresses challenges practitioners face with vaccine hesitancy and a thorough strategy to develop long-term capacity and support for graduates of

the program. Under Dr. Thacker's leadership, the SAG has obtained substantial funding from Sabin and others and has been able to modify the face-to-face champions workshops and add COVID19 impact to launch a new online curriculum to develop capacity in trainers who can then offer additional training to their colleagues on practical approaches and provide resources, techniques and tools to address vaccine hesitancy in real-time settings to overcome hesitancy that families present.

**Mental Health:** SAG lead: Colleen Kraft (USA)

This SAG addresses issues in collaboration with the Early Child Development, Adolescent, and NCD SAGs. The SAG lead participated in the IPA/UNICEF/WHO webinar on adolescence and mental health during COVID-19, and this is expected to be a growing area of work for this group in the coming year.

**Newborn Care/Resuscitation:** SAG lead: Bill Keenan (USA) Quality improvement lead: Doug McMillian (Canada) [note – initially a separate SAG –subsequently recognized as a cross-cutting strategy].

This SAG is involved in several WHO working groups addressing newborn health and survival. SAG members participate in the steering group working on strategic plans and milestones for the Every Newborn Action Plan; on the Small and Sick Newborn Care initiative committee identifying priority countries, on the LBW/Preterm Birth Estimates Consultation Group; and on committees providing ongoing input into the MNCAH essential newborn care (ENC) curricula to be implemented in priority countries. The SAG also supports WHO's work towards implementation of the Action Plan for "Strengthening quality midwifery education for UHC 2030: Framework for Action" and the Midwifery Skills Education Toolkit, by providing evidence based newborn survival content in midwifery skills tools implementation and supporting the harmonization of training curricula in the area of maternal and newborn care with WHO's standards for maternal and newborn care. The Action Plan document was completed and its implementation has been facilitated by quality improvement initiatives for member societies and WHO partners in countries. SAG members are also working with PMNCH and with the International Childbirth Initiative, FIGO and the White Ribbon Alliance to support the implementation of respectful maternity and newborn care.

**Non-communicable Diseases:** SAG Lead: Mychelle Farmer (USA)

This SAG is devoted to furthering the international agenda on non-communicable diseases and ensuring it remains a priority globally through partnerships and opportunities for collaboration. They have continued their strong collaboration with NCD-Child, working to raise awareness and highlight areas of focus for all pediatricians to address the issues and burdens of NCDs globally.

The SAG lead participates as a member of the WHO NCD Civil Society Workgroup, and the SAG actively participates in consultations organized by the World Health Organization related to youth engagement and people living with NCDs, including the importance of including children and adolescents living with NCDs and their families. In collaboration with NCD Child and the adolescent SAG and others, this SAG has taken a lead in developing a Call to Action to put children and adolescents first in the campaign for NCDs prevention and control, as part of Universal Health Coverage, and has been active in promoting this call at WHO and UN meetings. There has been an ongoing collaboration with global cancer, sickle cell, and diabetes organizations. SAG members have also been active in webinar presentations examining the impact of COVID19 on children and youth and NCDs.

**Nutrition:** SAG Lead: Berthold Koletzko (Germany)

This SAG is focused on developing capacity and identifying gaps in resources focused on nutrition through partnerships and opportunities for collaboration. Following a survey on nutrition competency and available resources in nutrition, they developed plans for workshops on Advanced Knowledge and Skills in Child and Adolescent Nutrition in collaboration with the Coalition of Centers in Global Child Health. They have also continued and strengthened IPA's collaboration with the European Commission, the European Parliament, the World Health Organization (WHO), the Food and Agricultural Organization of the United Nations (FAO), Codex Alimentarius of WHO and FAO, and other national and international governmental bodies and organizations addressing nutrition issues. In addition, SAG members have helped EC and SC members plan and implement our response to the IPA WHO work plan item to review existing policies and guidelines and propose guidance documents to guide nongovernmental organizations (including pediatric associations) in their relationships with the private sector, to fully align with and build capacity and compliance with the International Code of Marketing of Breast-milk Substitutes and subsequent relevant WHA resolutions.

### **Special Working Group on COVID19**

A special working group on COVID-19 and its impact were charged by Dr. Alden and the EC to develop IPA position statements on, and coordinate participation by IPA leaders with UNICEF and WHO partners.

Standing Committee members Klein, Koletzko, El-Shabrawi, Hadjipanayis, Thacker, and Bhutta wrote Promoting and supporting children's health and healthcare during COVID-19 (Arch Dis Child. 2020;105(7):620–4.) An IPA - UNICEF -WHO COVID-19 steering committee for collaborative efforts to address COVID-19 and children was convened to 1) Disseminate guidelines and updates to national, regional and global specialty professional associations in coordination with UNICEF and WHO outreach to country and regional offices; 2) Produce a series of webinars and short written products in English, French and Spanish to synthesize, summarize

and translate appropriate evidence and guidelines into priorities for practice and policy for newborn, child and adolescent health care delivery; 3) Strengthen technical relationships between WHO, UNICEF and IPA and collaborate to identify priority needs for further research and guidelines. The IPA UNICEF WHO COVID19 Project Phase 1 steering committee included Drs. Jonathan Klein and Zulfiqar Bhutta (IPA), Drs. Wilson Ware and Anshu Bannerjee (WHO) and Drs. Gagan Gupta, Stefan Peterson (May-June), and LuWei Pearson (June-December) (UNICEF). Technical support was provided by IPA professional staff and Dr. Naveen Thacker, IPA Executive Director. Spanish webinar leadership was provided by Drs. Oswaldo Revelo Castro and Carlos Alonso Rivera, and French webinar leadership was provided by Drs. Joseph Haddad, Madeleine Amorissani Folquet, and Ousmane Ndiaye. Please see the separate report on the COVID-19 project.

## IPA/UNICEF Collaboration on COVID-19 and Children

The IPA and UNICEF, in collaboration with WHO, launched a collaborative project on Children and COVID-19 in May 2020 to address the essential needs of children, ensure accurate information is available to professionals and the public, and ensure essential services for other health priorities, as well as for COVID-19, are accessible to all. To date the project has

- Written and disseminated two briefs summarizing WHO and UNICEF evidence reviews and guidelines for use by national and community stakeholders in child health care delivery. The first (released June, 2020) summarized the epidemiology of COVID-19 and MISC in childhood: [https://www.unicef.org/bulgaria/sites/unicef.org.bulgaria/files/2020-07/UNICEF-IPA\\_COVID\\_brief\\_WEB\\_29June\\_ENG.pdf](https://www.unicef.org/bulgaria/sites/unicef.org.bulgaria/files/2020-07/UNICEF-IPA_COVID_brief_WEB_29June_ENG.pdf). The second, to be released 3/21, “Doing No Harm in Newborn and Child Health during COVID19” in collaboration with UNICEF and USAID, is at: [docs.google.com/document/d/1bDMUyb1kvXnQ4XIVuZaLHzmRuhcBIJjN3m\\_wYE\\_Ods8g/edit?ts=5ff3725b](https://docs.google.com/document/d/1bDMUyb1kvXnQ4XIVuZaLHzmRuhcBIJjN3m_wYE_Ods8g/edit?ts=5ff3725b)
- Produced a series of 16 webinars in English, Spanish and French to synthesize, summarize and translate appropriate evidence and guidelines into priorities for practice and policy for newborn, child and adolescent health care delivery. Webinar addressed priority needs identified by IPA national societies and UNICEF and WHO regional and national offices, and included:
  - Newborn and perinatal issues: breastfeeding, rooming in, PPC/IPE at deliveries
  - Infection control; PPE guidelines for primary health care settings
  - COVID clinical care guidance, oxygen therapy issues, innovations in the field
  - Updates on diagnostics, testing, therapeutics and vaccines
  - Specialty focus - newborn, immunization, adolescent, mental health, special needs, etc.

- Experience of those in ICUs, Emergency departments, in low resource or fragile settings, etc.
- Safe schools during COVID-19
- Following the evidence and avoiding misinformation

The webinars were viewed > 36,200 times, reaching leaders in >70 countries, and are available on the IPA YouTube channel

[www.youtube.com/channel/UCdILbIZMM7LvMkXbTJwjRtQ](http://www.youtube.com/channel/UCdILbIZMM7LvMkXbTJwjRtQ)

and on the IPA website at <https://ipa-world.org/covid-19-webinar.php>

Strengthened the technical relationships between WHO, UNICEF and IPA and collaborated to identify priority needs for further research and guidelines. These included specific mobilization of technical experts for the WHO Guidelines Development Group around child development and mask use in children, and a consultation with on-the-ground infectious disease experts from countries with novel SARS-CoV-2 Coronavirus variants to address changing patterns of COVID-19 disease in children in these countries. We also participated actively in the Review Committee on the Functioning of the International Health Regulations during the COVID-19 Response, in the COVID19 ACT-Accelerator Vaccine Pillar (COVAX), and the Strategic and Technical Advisory Group of Experts (STAGE) for Maternal, Newborn, Child and Adolescent Health and Nutrition.


## **IPA Vaccine Trust Project:**

On 15th Dec'20, IPA launched the Vaccine Trust Course with an aim to increase and utilize the communication and advocacy skill sets of healthcare professionals providing or promoting vaccines and immunization.

IPA collaborated with the Sabin Vaccine Institute for targeted activities focusing on 7 Gavi transition countries in Eastern Europe (Armenia, Azerbaijan, Georgia, and Moldova) and Latin America (Bolivia, Guyana, and Honduras) utilizing IPA's Vaccine Trust Course for healthcare worker communication and advocacy.

Before IPA collaborated with SABIN, the intended audience for the course were pediatricians, nurses, and program managers, but through this partnership, we got the opportunity to expand the scale of the intended audience by involving midwives, physician's assistants, community health workers, and public health professionals and reach out to a larger cadre of health care workers involved in immunization.

As of 3rd March,'21, there are 1813 registrations for the course from 119 countries across the globe. The course is offered in six languages, i.e., English, Spanish, Russian, French, Portuguese, and Turkish. (Work is in progress for the Arabic and Chinese version)



All webinars organized under the collaboration with Sabin, including the launch event and ongoing promotion of the online Vaccine Trust Course has helped reach out to a large number of audiences across the globe. Through this, IPA has also been able to contact non-IPA member societies. The database generated through the ongoing activities will serve as a great opportunity in the roll-out of future courses as well.



### 3. FINANCIAL REPORT

The primary role of the IPA Treasurer is the monitoring of IPA expenditures and the preparation of financial reports for the Executive and Standing Committees. Below are the audit reports for 2018, 2019, and an unaudited sheet of the 2020 finance. 2021 budget proposal with total IPA assets to date is added.



#### International Pediatric Association (IPA)

Geneva

Auditors' report on the limited examination  
of the financial statements

Year ended December 31, 2018

In accordance with the mandate entrusted to us, we have examined the financial statements (balance sheet, statement of income and expenses, notes) of the **International Pediatric Association (IPA)** for the year ended December 31, 2018.

These financial statements are the responsibility of the International Pediatric Association (IPA) Executive committee. Our responsibility is to perform a limited examination on these financial statements.

We conducted our examination in accordance with the Swiss Auditing Standard 910 Review (limited examination). This standard requires that we plan and perform the limited examination to obtain moderate assurance that the financial statements are free of material misstatement. A limited examination consists primarily of inquiries of company personnel and analytical procedures applied to the financial data of the annual accounts and thus provide less assurance than an audit. We conducted a review and not an audit and, accordingly, we do not express an audit opinion.

Based on our limited examination, nothing has come to our attention that causes us to believe that the financial statements, showing net assets of USD 1'142'373, do not comply with Swiss law and the association's articles of incorporation.

Pully, May 31, 2019

**HP Révision & Conseil SA**  
(swiss licenced auditor, ASR n° 503934)

Henri Probst  
Swiss licensed audit expert

INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA

BALANCE SHEET AS AT DECEMBER 31, 2018  
In United States Dollars

	Note	2018	2017
<b><u>ASSETS</u></b>			
Cash and bank balances	3	1 145 723	1 198 163
		<u>1 145 723</u>	<u>1 198 163</u>
<b><u>LIABILITIES</u></b>			
Accounts payable		3 350	12 060
		<u>3 350</u>	<u>12 060</u>
<b><u>GENERAL RESERVES</u></b>			
General reserves brought forward		1 186 103	1 047 184
Result for the year		(43 730)	138 919
		<u>1 142 373</u>	<u>1 186 103</u>
General reserves carried forward		<u>1 145 723</u>	<u>1 198 163</u>

INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA

REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2018

In United States Dollars

	Note	2018	2017
<b><u>REVENUE</u></b>			
Membership dues	4	156 966	180 357
Panama 2019 grants received in advance	5	87 775	105 064
Income on sale of investments		--	54 552
		<hr/>	<hr/>
		244 741	339 973
		<hr/>	<hr/>
<b><u>EXPENSES</u></b>			
Meetings	6	209 893	126 390
Panama 2019 congress workshops paid in advance		69 975	0
General administrative expenses		43 601	50 428
Bank charges and exchange differences		5 002	24 236
		<hr/>	<hr/>
		288 471	201 054
		<hr/>	<hr/>
<b><u>Result for the year</u></b>		<b>(43 730)</b>	<b>138 919</b>

## **International Pediatric Association (IPA)**

Geneva

### **Auditors' report on the limited examination of the financial statements**

**Year ended December 31, 2018**

In accordance with the mandate entrusted to us, we have examined the financial statements (balance sheet, statement of income and expenses, notes) of the **International Pediatric Association (IPA)** for the year ended December 31, 2019.

These financial statements are the responsibility of the IPA Administrative Office. Our responsibility is to perform a limited examination on these financial statements.

We conducted our examination in accordance with the Swiss Auditing Standard 910 Review (limited examination). This standard requires that we plan and perform the limited examination to obtain moderate assurance that the financial statements are free of material misstatement. A limited examination consists primarily of inquiries of company personnel and analytical procedures applied to the financial data of the annual accounts and thus provide less assurance than an audit. We conducted a review and not an audit and, accordingly, we do not express an audit opinion.

Based on our limited examination, nothing has come to our attention that causes us to believe that the financial statements, showing net assets of USD 1'281'573, do not comply with Swiss law and the association's articles of incorporation.

Pully, February 18, 2020

**HP Révision & Conseil SA**  
(swiss licenced auditor, ASR n° 503934)



Henri Probst  
Swiss licensed audit expert

INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA  
 BALANCE SHEET AS AT DECEMBER 31, 2019  
 In United States Dollars

	NOTE	2019	2018
<b><u>ASSETS</u></b>			
Cash and bank balances	3	1 282 673	1 145 723
		<u>1 282 673</u>	<u>1 145 723</u>
<b><u>LIABILITIES</u></b>			
Accounts payable		1 100	3 350
		<u>1 100</u>	<u>3 350</u>
<b><u>GENERAL RESERVES</u></b>			
General reserves brought forward		1 142 373	1 186 103
Result for the year		139 200	(43 730)
		<u>1 281 573</u>	<u>1 142 373</u>
General reserves carried forward		<u>1 282 673</u>	<u>1 145 723</u>

INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA

REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2019

	Note	2019	2018
<b><u>REVENUE</u></b>			
Membership dues	4	286 955	156 966
Vaccine Hesitancy Program		77 000	--
IPA Foundation – Academic workshops		65 667	--
Panama 2019 grants received in advance	5	--	87 775
Interest income		7 195	--
Exchange gains		1 852	--
		-----	-----
		438 669	244 741
		-----	-----
<b><u>EXPENSES</u></b>			
Programs and Meetings		141 224	169 893
Panama 2019 congress workshops		52 065	69 975
Administrative expenses: President and Executive director		96 404	31 693
Geneva office		5 091	11 908
Bank charges and exchange differences		4 685	5 002
		-----	-----
		299 469	288 471
		-----	-----
<b>Result for the year</b>		<b>139 200</b>	<b>(43 730)</b>
		-----	-----

<b>Revenues</b>		<b>USD</b>
Registration revenues		\$ 965,503.00
Sponsor/Exhibitor revenues		\$ 580,516.00
Sanofi / IPAF Alumni Dinner (sent direct to IPA)		
Less Reg/SpEx funds due from Sponsor (Sanofi) - <i>Paid to IPA</i>		-\$ 88,596.00
Less Reg/SpEx funds due from IPAF (JnJ) - <i>Owed to IPA by IPAF</i>		-\$ 70,000.00
Less expense coverage due from IPAF (Alumni Dinner) - <i>Paid to IPA</i>		-\$ 11,756.20
<b>Total Revenue received by MCI</b>		<b>\$ 1,375,666.80</b>
<b>Expenses</b>		<b>USD</b>
Expenses paid (including sponsor expense coverage)		\$ 1,381,394.05
Less Expenses paid by client		-\$ 35,812.95
<b>Total Expense paid by MCI</b>		<b>\$ 1,345,581.10</b>
<b>Cash Flow at MCI</b>		<b>\$ 30,085.70</b>
Result per budget	\$	164,624.95
Funds to client directly	-\$	170,352.20
Expenses paid by client	\$	35,812.95
Cash Flow (above)	\$	30,085.70
Less profit split to PCO	-\$	32,924.99
<b>Funds to be transferred to (due from) client</b>	<b>-\$</b>	<b>2,839.29</b>
Funds owing IPA from IPAF (JnJ)	\$	70,000.00
Funds sent directly to IPA for Sanofi & IPAF Alumni	\$	100,352.20
Less funds due PCO for outstanding congress expenses	-\$	2,839.29
<b>Total funds to IPA from IPA 2019</b>	<b>\$</b>	<b>167,512.91</b>

#2 \$1,375,667 – this is how much money we received

#1 \$1,381,394 – this is how much MCI spent on this congress (on behalf of IPA)

#2 minus #1 equals - \$5,727, however, they gave us \$35,812 to pay for some of the expenses, hence our cashflow is \$30k per the left.

The invoice IPA paid is cash flow – has nothing to do with profit. Profit is overall revenue vs expenses and separate from cash flow.

## International Pediatric Association (IPA)

Geneva

**Auditors' report on the limited examination  
of the financial statements**

**Year ended December 31, 2020**

In accordance with the mandate entrusted to us, we have examined the financial statements (balance sheet, statement of income and expenses, notes) of the **International Pediatric Association (IPA)** for the year ended December 31, 2020.

These financial statements are the responsibility of the IPA Administrative Office. Our responsibility is to perform a limited examination on these financial statements.

We conducted our examination in accordance with the Swiss Auditing Standard 910 Review (limited examination). This standard requires that we plan and perform the limited examination to obtain moderate assurance that the financial statements are free of material misstatement. A limited examination consists primarily of inquiries of company personnel and analytical procedures applied to the financial data of the annual accounts and thus provide less assurance than an audit. We conducted a review and not an audit and, accordingly, we do not express an audit opinion.

Based on our limited examination, nothing has come to our attention that causes us to believe that the financial statements, showing net assets of USD 1'584'022, do not comply with Swiss law and the association's articles of incorporation.

Pully, March 3, 2021

**HP Révision & Conseil SA**  
(swiss licenced auditor, ASR n° 503934)



Henri Probst  
Swiss licensed audit expert



**INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA**

**BALANCE SHEET AS AT DECEMBER 31, 2020**

In United States Dollars

	<b>NOTE</b>	<b>2020</b>	<b>2019</b>
<b><u>ASSETS</u></b>			
Cash and bank balances	3	1,590,282	1 282 673
		<hr/>	<hr/>
		<b>1,590,282</b>	<b>1 282 673</b>
		<hr/>	<hr/>
<b><u>LIABILITIES</u></b>			
Accounts payable		6,260	1 100
		<hr/>	<hr/>
		<b>6,260</b>	<b>1 100</b>
		<hr/>	<hr/>
<b><u>GENERAL RESERVES</u></b>			
General reserves brought forward		1,281,573	1 142 373
Result for the year		302,449	139 200
		<hr/>	<hr/>
General reserves carried forward		<b>1,584,022</b>	<b>1 281 573</b>
		<hr/>	<hr/>
		<b>1,590,282</b>	<b>1 282 673</b>
		<hr/>	<hr/>

INTERNATIONAL PEDIATRIC ASSOCIATION (IPA), GENEVA

REVENUE AND EXPENSES FOR THE YEAR ENDED DECEMBER 31, 2020

In United States Dollars

	Note	2020	2019
<b><u>REVENUE</u></b>			
Membership dues	4	186,952	286 955
Congress (Panama IPA2019)	5	127,432	--
Vaccine Hesitancy Program		64,684	77 000
UNICEF – COVID19 study grant		49,000	--
Other grants		30,375	--
IPA Foundation – Academic workshops		3,631	65 667
Interest income		2,421	7 195
Exchange gains		16,363	1 852
		<hr/>	<hr/>
		480,858	438 669
		<hr/>	<hr/>
<b><u>EXPENSES</u></b>			
Programs and Meetings		117,514	141 224
Panama 2019 congress workshops		--	52 065
Administrative expenses: President and Executive director		49,729	96 404
Geneva office		6,770	5 091
Bank charges		4,396	4 685
		<hr/>	<hr/>
		178,409	299 469
		<hr/>	<hr/>
<b>Result for the year</b>		<b>302,449</b>	<b>139 200</b>
		<hr/>	<hr/>

# INTERNATIONAL PEDIATRIC ASSOCIATION

*2020 Final with 2021 Budget Proposal*

Account	<u>REVENUE</u>	<u>2021 Proposed</u> <u>Budget</u>	<u>2020 BUDGET</u>	<u>2020</u> <u>December YTD</u>
3204	Annual Dues	\$ 220,000	\$ 200,000	\$ 190,575
3240	IPAF Support	\$ -	\$ 50,000	\$ -
3270	Donations	\$ -		\$ -
3210	International Congress - Panama	\$ -		\$ 127,432
3220	Vaccine Hesitancy Program- SERUM	\$ 10,000	\$ 10,000	\$ 64,684
3230	Unicef - Covid 19 Study	\$ -		\$ 49,000
3290	Interest Income	\$ 1,000	\$ 10,000	\$ 2,390
3250	Miscellaneous			
3245	Sabin Grant	\$ 39,375		\$ 30,375
3260	Other Grants - to be determined	\$ 50,000		
	<b>Total IPA REVENUE</b>	<b>\$ 320,375</b>	<b>\$ 270,000</b>	<b>\$ 464,456</b>
	<b><u>EXPENSES</u></b>			
	<b><i>Administration Expenses</i></b>			
6502	President's Office Expenses	\$ 15,000	\$ 20,000	\$ 3,620
6536	Coordinator's Office Expenses	\$ 3,000	\$ 5,000	\$ -
6506	President Elect's Office Expenses	\$ 1,000	\$ 1,000	\$ -
6507	Executive Director's Office Expenses	\$ 23,000	\$ 25,000	\$ 20,698
6510	Geneva Office Expenses	\$ 4,000	\$ 4,000	\$ -
6509	Treasurer's Office Expenses	\$ 6,000	\$ 8,000	\$ 3,245
6515	Congress Expenses			\$ 10,054
	<b>Total Administrative Expenses</b>	<b>\$ 52,000</b>	<b>\$ 63,000</b>	<b>\$ 37,617</b>
	<b><i>Committee Meeting and Officer Travel</i></b>			

6505	External Relations (WHO, PMBCH, etc)	\$ 25,000	\$ 25,000	\$ 160
6500	Exec Committee/Standing Committee Meetings		\$ 50,000	\$ 759
	<b>Total Meetings and Travel</b>	\$ 25,000	\$ 75,000	\$ 919
	<i>Program Areas (TAGs)</i>			
6005	Vaccine Hesitancy Program - Sanofi	\$ 115,000		\$ 8,698
6015	Vaccine Hesitancy Program - Travel Expenses	\$ -		
6020	Unicef - Covid Expenses			\$ 40,265
6025	Sabin Grant Expenses	\$ 50,000		\$ 15,750
6030	IPA 2021 Congress	\$ 50,000	\$ 100,000	\$ 54,541
6035	Other Program Expenses	\$ 25,000		\$ -
	<b>Total Program Expenses</b>	\$ 240,000	\$ 100,000	\$ 119,254
	<i>Administrative Expenses and Services</i>			
6555	Website Maintenance	\$ 7,000	\$ 7,000	\$ 6,454
6520	IPA Journal/Newsletter	\$ 1,000	\$ 1,000	\$ 305
6530	Accounting and Auditing	\$ 10,000	\$ 15,000	\$ 1,817
6940	Bank Charges Sun Trust	\$ 7,500	\$ 6,000	\$ 3,914
6950	Merchant Fees - Credit Cards	\$ 1,000	\$ 500	\$ 1,508
6942	Swiss Bank - Exchange losses	\$ 250	\$ 250	\$ -
6568	D & O Insurance	\$ 3,500	\$ 1,500	\$ 3,205
	Chase Bank Expenses	\$ -		\$ -
6560	Registration Fiduciary in Switzerland	\$ 600	\$ 550	\$ -
6570	Legal Expenses	\$ 15,000	\$ 1,000	\$ -
6536	Tax Preparation	\$ 2,000	\$ 1,000	\$ -
6992	Currency Exchange Gains/Losses			
	<b>Total Service Expenses</b>	\$ 47,850	\$ 33,800	\$ 17,203
	<b>TOTAL IPA EXPENSES</b>	\$ 364,850	\$ 271,800	\$ 174,993
	<b>NET INCOME/EXPENSES</b>	\$ (44,475)	\$ (1,800)	\$ 289,463
	<i>Revised Budget Proposal as of 1/11/2021</i>			