ECUADOR

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- Expansion of coverage and universal insurance.
- Strengthening of the Ministry of Health as the health authority.
- Support for the negotiation and approval of the Ministry of Health’s budget reform for 2003 and subsequent years, with progressive increases in budget.
- Reduction of maternal and child mortality.
- Control of malaria and dengue.
- Support for negotiations with the Global Fund to Fight AIDS, Tuberculosis, and Malaria.
- Support for the activities of the Expanded Program on Immunization.
- Support for activities to guarantee food and nutritional security.
- Support for the implementation of health promotion strategies.
- Support for activities for the development of information systems, epidemiology, and health monitoring.
- Continued support for disaster prevention and mitigation programs.
- Support for implementation of the health and development project for the northeast part of the country.

PROJECTS

MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

PURPOSE
To coordinate and direct support for the development, management, and administration of technical cooperation projects, making use of up-to-date procedures and applying the norms and regulations of the Organization, ensuring that technical cooperation is carried out in an efficient and timely manner.

EXPECTED RESULTS
- Technical cooperation provided in adequate physical facilities, with trained support staff that meet the requirements of the Bureau.
- Technical cooperation projects provided with the administrative, logistical, and operational support necessary to facilitate the achievement of their technical development objectives.

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE
To orient technical cooperation according to national policies and plans to develop the National Health System and implement health sector reform processes, through a strategic balance of cooperation activities with actors external to the Representative Office and the internal administrative and technical coordination activities of the Representative Office, the central level, and PAHO’s specialized centers.

EXPECTED RESULTS
- Management of development processes and the efficiency of staff in the Representative Office to facilitate technical cooperation activities.
- Development and monitoring of technical cooperation among countries.
**Development of Health Systems and Services**

**Purpose**
- To develop and strengthen the National Health System and comprehensive, efficient, high-quality health service delivery.

**Expected Results**
- Progress made in constructing the National Health System through application of the NHS Law and the National Health Policy.
- Program coverage expanded and the problem-solving and managerial capacity of the health services strengthened.
- Human resources development, relying on new political and legal support and with new technical foundations for training, management, and upgrading.
- Implementation of the National Health System Law at the provincial and local levels.
- Expansion of primary care coverage and health promotion in the poorer parishes of the country.
- Human resources education redirected to family health practice.
- Metropolitan, provincial, and municipal service networks established.
- Response capacity of the service networks strengthened in Loja and Zamora provinces through the PHC and PS strategies.

**Health Promotion and Protection**

**Purpose**
- To contribute to the achievement of the population’s health and quality of life by strengthening health promotion, through processes based on national health policy, strategies, and priorities.

**Expected Results**
- National policy for health promotion and its components at national, regional, and local levels adopted, making use of methodological instruments, strategies, and priority approaches to health promotion and noncommunicable disease prevention and control.
- Systematic health promotion processes implemented in municipios, schools and other locations, reinforcing the adoption of healthy lifestyles and the creation and maintenance of healthy environments and social contexts, with emphasis on mental health, healthy eating and an active life, tobacco control, healthy motherhood, reproductive health, and public safety.
- Impetus provided to processes that promote individual and collective capacity-building for the adoption of healthy lifestyles and environments and for the prevention of risks and disasters, with attention to priority programs and projects that employ an integrated approach.
- National policy for promoting health and its components adopted at the provincial and local levels in the Sierra region.
- Principal health promotion strategies implemented in the cantons of the Sierra.
- Municipios mobilized and health promotion activities carried out in some healthy cantons and schools.
- Local entities trained in health promotion consolidated under the Healthy Settings project, to strengthen capacity for the implementation of health promotion activities with local actors: municipios, schools, grassroots organizations, etc.
ENVIRONMENTAL PROTECTION AND DEVELOPMENT

PURPOSE
To strengthen the steering role of institutions working in health and environment through reforms in the water and sanitation sector, especially promoting a national environmental management policy with an intersectoral, multicultural, and gender-based approach. To consolidate the reorganization of the water and sanitation sectors, with emphasis on children and risk management.

EXPECTED RESULTS
• Improved capacity of the Ministries of Public Health, Environment, Urban Development and Housing, municipios, and the national institutions and organizations responsible for monitoring and assessing health risks and environmental control, within the framework of the health code and related standards.
• Support provided for national and local processes for the creation of social networks in the framework of the primary environmental care strategy, with an intersectoral, multicultural, and gender-based approach targeting children.
• Graduate training developed, with changes in the curriculum for strengthening human resources skilled in the management of environmental and health issues.
• Local governments in the Sierra region better able to monitor and assess health risks and monitor the environment within the framework of the health code and related standards.
• Actions of local social networks coordinated within the framework of the primary environmental care strategy, with an intersectoral, multicultural, and gender-based approach targeting children.
• PHC and PEC networks created, with operational plans at the provincial level.
• Support provided for development and implementation of the primary environmental care strategy within the framework of PHC through the strengthening of local social networks and the participation of municipal governments in Zamora and Loja provinces.

HEALTH MONITORING, DISEASE PREVENTION AND CONTROL

PURPOSE
To strengthen the National Health System through actions to expand coverage, improve quality, and increase problem-solving capacity for the surveillance, prevention, and control of communicable and noncommunicable diseases, boosting intersectoral and participatory capacity at the national level and in the Costa, Sierra, and Sul regions.

EXPECTED RESULTS
• Surveillance, disease prevention and control carried out within the NHS management model, with technical programming coherence among national, provincial, and municipal priorities, and providing epidemiological, demographic, ethnic, and cultural diversity profiles.
• Institutional and community capacity developed, with functional, intersectoral, and participatory networks and structures that operate at the provincial and cantonal levels for the surveillance, prevention, control, elimination, and eradication of diseases with a greater social impact, together with communicable and noncommunicable diseases, zoonoses, foodborne diseases, and emerging and/or reemerging diseases.
• Operations research conducted by epidemiological teams to make interventions under the programs for surveillance and disease prevention and control more effective, efficient, equitable, and participatory.
• Surveillance, prevention, control, elimination, and eradication of preventable diseases through vaccination accomplished within the framework of the National Health System Law, based on national and regional priorities and international commitments, responding effectively and equitably to epidemiological risks and to demographic, economic, ethnic, and cultural features, developing networks with different sectoral and
intersectoral actors at the provincial and cantonal or health area levels to improve problem-solving and community capacities, promoting operations research on social factors, and evaluating the impact and implementation of efficient, equitable, and participatory interventions.

- Planning of surveillance, disease prevention, and control by leaders at provincial and health areas, in conjunction with provincial and cantonal health councils.
- Coordinated, simultaneous action taken by institutions and the community in the provinces and cantons for surveillance and disease prevention and control, under the management of the provincial leadership and within the framework of the National Health System.
- Restructured and strengthened capacity of governing bodies in the provinces and health areas to conduct epidemiological and operations research to support disease surveillance, prevention, and control, including a speedy response to disasters.
- Intersectoral networks created in Loja and Zambora provinces and priority cantons for interventions based on epidemiological criteria, for the purpose of joint action to control diseases under epidemiological surveillance, as support for the provincial governing bodies.

**HEALTH SITUATION, INTERCONECTIVITY, AND TECHNOLOGY DEVELOPMENT**

**PURPOSE**
To strengthen health surveillance and the development of information systems and methodological instruments to document inequities in health, as well as to increase national and subnational capacity in connectivity and technology development.

**EXPECTED RESULTS**
- Improved development plan for essential public health functions 1 and 2, as well as improved research and documentation of inequities in health.
- Needs identified and proposals for greater connectivity of health information systems prepared.
- Needs identified and proposals for technology development in the health sector prepared.
- Situation rooms set up to define intervention strategies for public health problems in the Costa region.
- Essential public health functions 1 and 2 implemented, with capacity at the provincial and cantonal levels of the Ministry of Public Health.
- Plan for the development of essential public health functions 1 and 2 implemented.

**DISASTER PREPAREDNESS PROGRAM**

**PURPOSE**
To reduce the impact of disasters on the health of the population of South America.

**EXPECTED RESULTS**
- National disaster management systems with greater capacity for disaster preparedness.
- Heightened awareness and knowledge of the impact of natural hazards on health facilities and water and sanitation systems.
- Post-disaster health needs evaluated by the countries of the region and situations efficiently managed.
- Corporate commitment of PAHO to reduce vulnerability to disasters.
### Resources (US$)

<table>
<thead>
<tr>
<th></th>
<th>Regular Budget</th>
<th>Other Sources</th>
<th>All Funds</th>
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<tbody>
<tr>
<td><strong>Total 2002-2003</strong></td>
<td>3,508,800</td>
<td>2,383,600</td>
<td>5,892,400</td>
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<tr>
<td><strong>Total 2004-2005</strong></td>
<td>3,983,100</td>
<td>21,700</td>
<td>4,005,500</td>
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</table>

#### Percentage of estimated expenditure

<table>
<thead>
<tr>
<th>Category</th>
<th>Regular Budget</th>
<th>Other Sources</th>
<th>All Funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country program support</td>
<td>34%</td>
<td>8%</td>
<td>34%</td>
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<tr>
<td>Intersectoral action and sustainable Development</td>
<td>24%</td>
<td>-</td>
<td>24%</td>
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<tr>
<td>Health information and technology</td>
<td>12%</td>
<td>-</td>
<td>12%</td>
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<tr>
<td>Universal access to health</td>
<td>15%</td>
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<td>15%</td>
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<tr>
<td>Disease control and risk management</td>
<td>14%</td>
<td>-</td>
<td>14%</td>
</tr>
<tr>
<td>Family and community health</td>
<td>1%</td>
<td>92%</td>
<td>1%</td>
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