EL SALVADOR

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- Consolidate the health promotion platform and provide standards for child health and the sustainability of healthy settings.
- Continue with reform and modernization in the health sector, the establishment of the Basic Comprehensive Health Systems (SIBASI) network, and human resources development.
- Establish epidemiological surveillance mechanisms to control emerging, reemerging, and chronic diseases.
- Generate joint action with the country to promote the environment, water, and basic sanitation, in order to strengthen intersectoral partnerships.
- Establish an Intersectoral Plan of Action for Food and Nutrition Security (FNS).

PROJECTS

ENVIRONMENTAL PROTECTION AND DEVELOPMENT

PURPOSE
To reduce environmental risk factors by strengthening institutional capacity for standardization and control.

EXPECTED RESULTS
- Standard-setting and regulatory capacity for environmental health management in light of environmental risks to human health strengthened, adapting to the new structure stemming from the reform and modernization of the Ministry of Health.
- Risks of death and disease from polluted water and improper sanitary refuse and excreta disposal reduced.
- By the end of the period, environmental health management for regulation and control of environmental human health risk factors strengthened, especially in terms of health in housing, urban air quality, exposure to hazardous substances, and food safety.
- The health sector better trained in emergency preparedness and rapid and effective response to potentially dangerous natural phenomena.

HEALTH IN DEVELOPMENT AND HEALTH SERVICES

PURPOSE
To strengthen the capacity of the national health authority to exercise its sectoral steering role and monitor implementation of the essential public health functions; and expand social protection in health; to improve health quality and health management; and to formulate health policies and priorities to reduce inequities.

EXPECTED RESULTS
- Steering role of the Ministry of Health consolidated through sectoral reform and the strengthening of performance in the EPHF.
- National capacity for analyzing strategies to reduce inequities, for policy-making based on analysis of national expenditures, and for the inclusion of health priorities in development strategies and policies, increased.
- National capacity for law-making, standard-setting, and regulation of public health, medical care, essential drugs, supplies, and technology strengthened.
- National capacity for organizing, administering, and evaluating health systems and for improving performance of the health services in terms of reducing inequalities in access, strengthened.
- Citizen participation consolidated at the national level and in the SIBASI for analysis, planning, and definition of priorities in health; for the municipalities to assume greater responsibility in health promotion, and for consolidation of mechanisms for social control of health management in the SIBASI.
- A national policy for human resources development in health implemented and national capacity strengthened for planning, administering, and training human resources for health as a component of reform and of the steering role of the Ministry of Public Health and Social Welfare.

### SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

**PURPOSE**
To ensure specialized technical cooperation for the country, making optimal use of technical assistance and the administrative capacity of the Representative Office; in addition to implementing the technical cooperation program in an expeditious, efficient, and pertinent fashion.

**EXPECTED RESULTS**
- Timely and efficient delivery of technical and financial cooperation provided to the country.
- Leadership in the delivery of international cooperation in health sustained.
- Technical and administrative support facilitated for implementing cooperation projects and strengthening the Representative Office.
- Specific areas of the program for cooperation and sharing experiences among countries strengthened.

### HEALTH PROMOTION

**PURPOSE**
To develop national capacity to advance the health promotion platform.

**EXPECTED RESULTS**
- Plans, policies, standards, instruments, and initiatives formulated and implemented to advance health promotion at the national and local levels. Gender perspective incorporated in different health reform processes and initiatives.
- Policies, plans, programs, and projects formulated and implemented to promote Food and Nutrition Security (NFS) at the national and local levels, with emphasis on populations at greater risk.

### COMMUNICABLE DISEASE PREVENTION AND CONTROL

**PURPOSE**
To develop response capacity in the health sector as support for reducing morbidity and mortality from communicable and noncommunicable diseases.

**EXPECTED RESULTS**
- Policies, plans, and standards developed for the prevention and control of vector-borne diseases.
- Policies, plans, and standards developed for the prevention of communicable, emerging, and reemerging diseases.
- Policies, plans, and standards developed for the prevention and control of noncommunicable chronic diseases.
- National Epidemiological Surveillance System developed and strengthened, as well as the capacity for statistical-epidemiological analysis.
- Capacity developed for the epidemiological surveillance, prevention, and control of anthropozoonoses.
MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

**PURPOSE**

To provide administrative support for the technical program in everything related to personnel management, budget and finance, supplies, general services, transportation, and safety.

**EXPECTED RESULTS**

- Administrative support. Timely and efficient delivery of technical cooperation and financing to the country guaranteed.
- Safety measures. Compliance with safety measures prescribed by UNSECORD guaranteed.

**RESOURCES (US$)**

<table>
<thead>
<tr>
<th></th>
<th>Regular budget</th>
<th>Other sources</th>
<th>All funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total 2002-2003</td>
<td>2,985,300</td>
<td>3,827,300</td>
<td>6,812,600</td>
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<tr>
<td>Total 2004-2005</td>
<td>3,074,900</td>
<td>20,000</td>
<td>3,094,900</td>
</tr>
</tbody>
</table>

**Percentage of estimated expenditure**

- Country program support: 41% - 100% - 42%
- Intersectoral action and sustainable Development: 13% - - 13%
- Health information and technology: 2% - - 1%
- Universal access to health: 17% - - 17%
- Disease control and risk management: 16% - - 16%
- Family and community health: 11% - - 11%