VENezuela

National Priorities for PAHO Technical Cooperation

To improve the health and quality of life of the Venezuelan population.
> To provide technical cooperation to Venezuela, Aruba, and the Netherlands Antilles that effectively and efficiently responds to national priorities.
> To promote health and human development to improve the health and quality of life of the Venezuelan population.
> To develop the public health system and services to improve the health and quality of life of the Venezuelan population.
> To develop health promotion and comprehensive care to improve the health and quality of life of the Venezuelan population.
> To prevent and control priority communicable and noncommunicable diseases to improve the health and quality of life of the Venezuelan population.
> To protect and develop the environment to improve the health and quality of life of the Venezuelan population.
> To support technical cooperation for Venezuela, Aruba, and the Netherlands Antilles, so that it effectively and efficiently responds to national priorities.

Projects

Management and Support for the National Development of Venezuela, Aruba, and the Netherlands Antilles

Purpose

To make the technical cooperation provided to Venezuela, Aruba and the Netherlands Antilles respond effectively and efficiently to national priorities.

Expected Results

• Support for the development of public health in Venezuela, Aruba, and the Netherlands Antilles strengthened.
• Management and coordination of the program for Venezuela, Aruba, and the Netherlands Antilles strengthened.

Health in Human Development

Purpose

To consolidate the integration of health into social development through an equity, gender, ethnic, and life cycle approach, within the political and legal framework.

Expected Results

• Regulations and legal instruments formulated that permit the application of the Organic Health Act and the policies, strategies, and plans that constitute the support required by the Ministry of Health and Social Development to exercise its leadership of the National Health System.
• Institutional, public, and private capacity strengthened for exercising the public health monitoring function as support for health management.
• Capacity of the National Institute of Women (INAMUJER) strengthened to incorporate the gender and equal-opportunity approach into the policies, plans, programs, and strategies of the ministries of the Social Cabinet.
DEVELOPMENT OF THE HEALTH SYSTEM AND SERVICES

**PURPOSE**
To consolidate the transformation of the sector, the steering role of the Ministry of Health and Social Development, and the development of a National Health System.

**EXPECTED RESULTS**
- Technical capacity for implementing systems to promote programs and social networks integrated by territory strengthened in all the states of the country (Amazonas, Bolívar, Cojedes, Delta Amacuro, Zulia, Sucre, Guarico, Barinas, Apure, Táchira, Lara, and Yaracuy).
- State capacity strengthened at the national and state levels for the implementation of policies, exercise of the steering role in the development of human resources for health, and public health research within the Ministry of Health and Social Development.
- Consolidation of a National Pharmaceutical System capable of guaranteeing equitable access to high-quality, safe and effective drugs, which are administered according to basic criteria that ensure their more rational use.
- Consolidation of the Ministry of Health’s Department of Information, Education and Communication to contribute to the improvement of access and the efficient use of scientific and technical information in the health sciences.

PROMOTION OF QUALITY OF LIFE AND OF HEALTH

**PURPOSE**
To develop and apply comprehensive care, encouraging health promotion and social development activities in priority groups, with a broad social participation.

**EXPECTED RESULTS**
- Capacity to develop integrated public policies and food and nutritional surveillance systems for the population strengthened, with an emphasis on priority groups.
- Capacity to formulate regulations, plans of action, and programs for adolescents and their sexual and reproductive health strengthened at the national level and in priority states to reduce maternal mortality and teenage pregnancies.
- Capacity to control and monitor the growth and development of children under 5 strengthened at the grassroots level through Community Health Facilities.
- Strengthened legal framework for executing national public policies for the prevention and control of smoking.
- Strengthened system for quality assurance and the surveillance of fluorine in food subject to compulsory fortification.
- Strengthened technical capacity of the Ministry of Health and Social Development at the national and state levels for carrying out activities related to mental health and human behavior, within the framework of comprehensive care.
- Greater capacity to provide comprehensive care for older adults, the indigenous population, and people with disabilities, with emphases on health promotion and community participation.
- Greater technical capacity to develop campaign proposals for mass communication and intersectoral approaches and to create local social networks, seeking community organization and participation in health management and promotion.
**DISEASE PREVENTION AND CONTROL**

**PURPOSE**
To implement policies and strategies for comprehensive care with protection, promotion, prevention, control and rehabilitation activities for priority communicable and noncommunicable diseases, including zoonoses, FBDs, emerging and reemerging diseases, and violence.

**EXPECTED RESULTS**
- Strategies developed for health promotion, the protection, prevention, and control of communicable diseases, and rehabilitation.
- Surveillance systems strengthened, with a special focus on laboratory diagnoses and services for emerging and reemerging diseases, as well as prevention.
- Human and animal health services infrastructure strengthened.
- Capacity strengthened for the design and execution of operations research for communicable and noncommunicable diseases.

**ENVIRONMENTAL PROTECTION AND DEVELOPMENT**

**PURPOSE**
To develop the technical capacity of the health and environmental sector to evaluate and monitor environmental determinants, and to develop campaigns for environmental protection, risk prevention, and response to emergencies and disasters.

**EXPECTED RESULTS**
- Proposals formulated for policies/laws/regulations/standards in the field of environmental health and protection and emergencies and disasters.
- Institutions in the field of environmental health, emergencies, and disasters strengthened.

**IMPLEMENTATION OF COOPERATION IN HEALTH AND SOCIAL DEVELOPMENT**

**PURPOSE**
To strengthen the institutional capacity of the Ministry of Health and Social Development for the coordination, mediation, and effective and systematic utilization of technical and financial cooperation that the country receives and offers, nationally and internationally.

**EXPECTED RESULTS**
- Greater capacity in the Bureau of Technical Cooperation and International Relations of the Ministry of Health and Social Development for coordinating technical cooperation in public health and social development with other national and international actors.
- Greater capacity of the Bureau of Technical Cooperation and International Relations for mediation and monitoring of the various technical cooperation activities carried out at the Ministry of Health and Social Development.
- Capacity for the preparation and implementation of projects for technical cooperation among countries strengthened.
## Resources (US$)

<table>
<thead>
<tr>
<th>Percentage of estimated expenditure</th>
<th>Regular budget</th>
<th>Other sources</th>
<th>All funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total 2002-2003</td>
<td>4,715,300</td>
<td>384,500</td>
<td>5,099,800</td>
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<tr>
<td>Total 2004-2005</td>
<td>4,150,700</td>
<td>-</td>
<td>4,150,700</td>
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<tr>
<td>Country program support</td>
<td>41%</td>
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<td>41%</td>
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<tr>
<td>Intersectoral action and sustainable Development</td>
<td>8%</td>
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<tr>
<td>Health information and technology</td>
<td>11%</td>
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<td>11%</td>
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<tr>
<td>Universal access to health</td>
<td>19%</td>
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<td>19%</td>
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<tr>
<td>Disease control and risk management</td>
<td>16%</td>
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<td>16%</td>
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<tr>
<td>Family and community health</td>
<td>5%</td>
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<td>5%</td>
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