## ANTIGUA AND BARBUDA

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Adolescent health/Health and family life education.
- > Integration of HIV/AIDS and STI programs.
- > Noncommunicable diseases.
- Nutrition.
- > Oral health.
- > Mental health/Substance abuse, including tobacco and alcohol.
- > Essential public health functions.
- > Disaster management.
- > Organization and management of health services.
- > Public/private partnerships.
- > Health care financing and medical benefits scheme.
- > Evaluation of pharmacy training program.
- > Quality improvement.
- > Health information/Disease surveillance/Information, education, and communication.
- > Human resource development.
- > Health sector reform, including legislation.

## **PROJECTS**

#### HEALTH SYSTEMS DEVELOPMENT

## **PURPOSE**

To improve the performance of the Ministry of Health.

## **EXPECTED RESULTS**

- Support provided for the development of policies and plans to improve the productivity of health providers.
- Support provided for the development of models and mechanisms to improve the health information system.
- Support provided for the development of policies, plans, and projects to improve the capacity of the Ministry of Health to regulate and monitor the delivery of health services.
- Program implementation, monitoring, and evaluation mechanisms in place.

### HEALTH PROMOTION AND HEALTHY LIFESTYLES

## PURPOSE

To make operational policies and programs for selected NCDs and HIV/AIDS/STI prevention and control.

- Support provided for the introduction of methods, models, and technologies for the early detection and adequate clinical management of selected conditions (NCDs and HIV/AIDS/STI and their complications).
- Support provided for the design and implementation of plans, projects, and policies to support the adoption of healthy lifestyles.
- Surveillance and information systems enhanced.
- Plans, projects, and policies introduced to mobilize additional human, material, and financial resources.

## **ENVIRONMENTAL HEALTH**

## **PURPOSE**

To enhance the capacity of the Central Board of Health to respond to environmental health needs adequately.

## **EXPECTED RESULTS**

- Support provided for the implementation of programs, policies, and norms to strengthen environmental health services
- Support provided for the expansion of cooperation networks and alliances to strengthen interagency coordination of environmental health issues.
- Human resource capacity strengthened to deliver the environmental health program.
- Capacity to mobilize resources enhanced to improve the environmental health program.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		187,400	-	187,400
Total 2004-2005		176,100	ı	176,100
	Country program support	6%	-	6%
	Intersectoral action and sustainable			
Percentage of	Development	8%	-	8%
estimated expenditure	Universal access to health	54%	-	54%
	Disease control and risk management	24%	-	24%
	Family and community health	8%	-	8%

## ARGENTINA

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Address the crisis in the sector, together with national, provincial, and local authorities and civil society organizations that work in this area.
- > Strengthen primary health care so that the country has an efficient and equitable health system with less duplication.
- > Develop, maintain, and optimize health information, monitoring, and surveillance systems as the fundamental pillars for PAHO efforts over the next two-year period.
- > Reduce potential inequities in areas where there have been high levels of development in recent decades, such as human resources, health and the environment, and control of communicable and vaccine-preventable diseases, all of which could be seriously affected by the new scenario.
- > Coordinate with other organizations in the United Nations system and search for support from external financing institutions, such as projects already under way or programmed for the coming years by the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and loans and donations from the Government of Italy.

## **PROJECTS**

## MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

## **PURPOSE**

To ensure that the Administration responds efficiently to the needs of the technical cooperation projects of the Representative Office and other PAHO/WHO units.

#### **EXPECTED RESULTS**

- Administrative structure of the PAHO/WHO Representative Office (PWR) designed so that its processes respond to the demands of cooperation activities.
- Planning, management, and control system of the Expanded Textbook Program (PALTEX) in Argentina operational.

## PROJECT TO SUPPORT NATIONAL HEALTH DEVELOPMENT

## **PURPOSE**

To strengthen the national leadership of the Ministry of Health in its regulatory function and international reach.

- Joint policies and plans between the national and provincial level put forward to carry out public health policies.
- Subregional agreements in health (SGT 11) and food (SGT 3) that promote the participation of PAHO staff in specific areas proposed within the framework of MERCOSUR.
- The Comprehensive Communication Plan of the Representative Office carried out, generating information that
  optimizes the available technology, and training provided to local staff in the management of administrative,
  language, and staff development software.
- Projects between countries with shared health problems in border areas in development. Cooperation projects for scientific research and technology development between countries operational.

• Interinstitutional thematic groups to develop bioethics and strengthen the gender approach at the national level established, with the participation of public institutions, universities, and NGOs. Specific projects and initiatives in health and poverty prepared by the Group as part of a structural analysis.

# DEVELOPMENT OF THE INSTITUTIONAL RESPONSE TO HEALTH PROBLEMS (INCLUDES HEALTH TECHNOLOGY AND INFORMATION MANAGEMENT)

### **PURPOSE**

To support national officials in configuring a more effective health services model for the country, based on changes prompted by the health crisis.

### **EXPECTED RESULTS**

- Plans prepared to strengthen the steering role of the Ministry of Health (at the national level, in provincial ministries, and in municipal health management).
- Innovative management models and processes for health systems and services under implementation.
- Health information systems established at the provincial and local levels.
- Thematic libraries and Virtual Health Libraries (VHL) established, developed, and consolidated.
- The Information and Communication Management Area established and consolidated.

## **HUMAN RESOURCES IN HEALTH**

### PURPOSE

To improve the decision-making capacity of the Ministry of Health with regard to human resource policies and the regulatory and monitoring mechanisms they require.

### **EXPECTED RESULTS**

- Provincial and national studies under way, using data obtained from the Human Resources Observatory, and
  efforts begun for the planning and new management of decentralized human resources and the regulations
  required for those activities.
- Public Health Network under consolidation, as well as proposals for changes in medical education and medical residencies required by national accreditation processes.
- New development policies and plans for nursing and health technicians operational.

### ENVIRONMENTAL HEALTH AND DISASTERS

## **PURPOSE**

To strengthen national capacity to reduce environmental risks to health and to prepare for and respond to emergencies.

- Programs with multisectoral participation promoted to identify, evaluate, and/or control environmental conditions that pose a threat to human health, with emphasis on the most vulnerable populations.
- Processes proposed to strengthen the capacity of the Ministry of Health in primary environmental care, and programs to preserve or improve a safe physical environment for health operational.
- Plans proposed to strengthen the capacity of the Ministries of Health and the Interior to prevent and respond to emergencies and natural or technological disasters.
- Projects and programs designed to strengthen multisectoral performance in environmental health and sustainable human development, and an information and training strategy promote to better manage and reduce environmental risks to human health.

## HEALTH SITUATION ANALYSIS AND DISEASE PREVENTION AND CONTROL

## **PURPOSE**

To strengthen institutional capacity for situation analysis, monitoring the impact of the crisis and optimizing the response to the principal health problems in the new context of economic crisis.

### **EXPECTED RESULTS**

- Plans and programs proposed for the different levels of the health sector, for the national health statistics and health surveillance systems, and for health analysis and the dissemination of health information.
- Proposals developed to maintain the capacity of programs to control communicable diseases at greater risk of
  emergence and reemergence because of the crisis, including vaccine-preventable diseases, and to develop the
  capacity for programming and implementing new communicable disease control programs, including support
  for vaccine and drug procurement processes.
- Plans and strategies designed to develop the capacity for programming and implementing noncommunicable disease control measures.

## HEALTH PROMOTION

## PURPOSE

To develop health promotion policies and strategies in different fields and for different geographical areas, including policies and processes related to the health of mothers, children, and adolescents and reflect the commitments to national and international goals.

### **EXPECTED RESULTS**

- Public health policy projects developed nationwide through strategies for municipal health, health in prisons, and schools of health.
- Policies, plans, and programs in development for special programs, such as those that address mental health, violence, epilepsy, tobacco and drug addiction, and for health education.
- Models and processes prepared to develop national and provincial plans that help to improve health and qualityof-life indicators for mothers, the development of children and adolescents, and the development of permanent
  food and nutrition programs.

		Regular budget	Other sources	All funds
Total 2002-2003		5,270,400	730,600	6,001,800
Total 2004-2005		4,140,200	150,000	4,290,200
	Country program support	31%	-	33%
	Intersectoral action and sustainable			
Percentage of	Development	18%	-	17%
estimated expenditure	Health information and technology	20%	-	19%
	Universal access to health	31%	-	31%

## **BAHAMAS**

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > National Health Insurance: the Blue Ribbon Commission.
- > Public health information system (PHIS), SIP, neonatal and adolescent health information systems, hospital information systems and management information system (MIS).
- > Regulation/accreditation (EMT, Drug Formulary, Dental Act, and others).
- > Strategic planning, monitoring, and evaluation.
- > Family health: Healthy Schools Initiative; mental health; chronic noncommunicable diseases; violence; and injury prevention.
- > Comprehensive care for HIV/AIDS.
- > Disaster preparedness.
- > BEST Commission and environmental health.

## **PROJECTS**

### HEALTH SYSTEMS STRENGTHENING

## **PURPOSE**

To strengthen the public health care system to provide comprehensive quality care to individuals and population groups based on health promotion and disease prevention criteria.

## **EXPECTED RESULTS**

- Planning unit capacity strengthened.
- Primary care delivery system strengthened to provide comprehensive care.
- Public health sector capacity strengthened in human resource management.
- PHA planning and management capacity strengthened.
- National Quality Improvement Program strengthened.
- Support services strengthened to ensure quality health care.
- National Emergency Unit strengthened for strategic planning and management and MOH disaster preparedness capacity improved.

## EVIDENCE-BASED DECISION MAKING

## **PURPOSE**

To strengthen the capacity of the Ministry of Health to direct and manage the National Health Information System and Network strategically.

- Capacity of the Ministry of Health strengthened to collect, analyze, integrate, and evaluate information from different sources.
- Capacity of the Department of Public Health' strengthened for the strategic direction and management of the PHIS
- Comprehensive surveillance system strengthened.
- Hospital-based information systems strengthened.
- Improved public health sector capacity to conduct research in public health.

### CHILD AND ADOLESCENT HEALTH

## **PURPOSE**

To reduce child and adolescent morbidity and mortality.

### **EXPECTED RESULTS**

- Neonatal resuscitation capability improved at PMH and the Rand.
- Health of preschool children and first graders improved.
- Adolescent health services improved.
- Detection and management of child abuse improved.

## HEALTH OF THE ADULT

## **PURPOSE**

To improve the management of diabetes and hypertension and of breast, cervix, and prostate cancer programs.

## **EXPECTED RESULTS**

- Management of diabetes and hypertension improved.
- Programs for the early detection and management of breast, cervix, and prostate cancer improved.
- Management of STIs and HIV/AIDS improved in the Family Islands and New Providence.
- Health education programs concerning hypertension and cervix and prostate cancer.
- Community mental health program strengthened.

### **ENVIRONMENTAL HEALTH**

## **PURPOSE**

To improve the effectiveness of the managerial staff of all programs, particularly those related to vector control and water quality.

## **EXPECTED RESULTS**

- Managerial capacity of senior and middle managers improved.
- Water quality standards and supporting legislation developed.
- Environmental Health Information System developed.
- Vector control and food safety programs improved.

## MANAGEMENT OF THE REPRESENTATION

#### PURPOSE

To provide the administrative support needed to implement and help achieve the expected results of technical cooperation projects.

- Support provided to duty travel of PWR and to hospitality.
- Effective administrative support provided to the representation.

		Regular budget	Other sources	All funds
Total 2002-2003		1,283,200	46,600	1,329,800
Total 2004-2005		1,368,800	200	1,369,000
	Country program support	58%	-	58%
	Intersectoral action and sustainable			
Percentage of	Development	5%	-	5%
estimated expenditure	Health information and technology	3%	-	3%
	Universal access to health	30%	-	30%
	Disease control and risk management	4%	-	4%
	Family and community health	-	100%	_

## **BARBADOS**

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Health systems.
- > Chronic, noncommunicable diseases.
- > Food, nutrition, and physical activity.
- > Family health, with special emphasis on the health of the elderly.
- > Environment and health.
- > Institutional services.
- > Mental health and substance abuse.
- > Human resource development and management.
- > Research.
- Communicable diseases, including HIV/AIDS.

## **PROJECTS**

## HEALTH SYSTEMS DEVELOPMENT

## **PURPOSE**

To improve health systems to deliver efficient, effective, and quality services.

## EXPECTED RESULTS

- Management systems strengthened.
- Financial systems improved to achieve equity, sustainability, and efficiency.
- CQI programs established in all health institutions.
- Comprehensive health information system improved.
- Acquisition and maintenance programs developed.
- Procurement, inventory, and distribution systems improved.
- Program to address multihazard disasters and emergencies strengthened.
- Policies, plans, and procedures for the management of human resources improved.

## **FAMILY HEALTH**

## **PURPOSE**

To develop and implement national family health programs, based on health promotion, disease prevention, and life cycle approaches.

- Plans, projects, and policies developed and implemented to strengthen community-based programs for health of the elderly.
- Methods, models, and technologies implemented to strengthen mental health and substance abuse programs.
- Support provided to plans, projects, and policies to prevent and control CNCD.
- Standards and guidelines promoted in nutrition and physical activity.
- Plans, projects, and policies regarding the oral health program strengthened.
- Surveillance systems strengthened.

## COMMUNICABLE DISEASES/ENVIRONMENTAL HEALTH

## **PURPOSE**

To strengthen programs to prevent environment-related communicable diseases, STIs, and TB.

## **EXPECTED RESULTS**

- Support provided to promotional campaigns for environmental health.
- Support provided for standards and guidelines for the food safety program.
- Support provided to critical elements for improving waste management.
- Support provided for evaluation and research to manage the vector control program.
- Program for clinical management of STIs (not including HIV/AIDS) and other communicable diseases including TB strengthened.
- General cooperation activities implemented.

## SUPPORT TO THE TECHNICAL COOPERATION PROGRAM

### **PURPOSE**

To manage the Technical Cooperation Program.

## **EXPECTED RESULTS**

• Support provided to PAHO/WHO technical cooperation activities in Barbados.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		758,800	18,700	777,500
Total 2004-2005		723,000	-	723,000
	Country program support	25%	-	25%
	Intersectoral action and sustainable			
Percentage of	Development	7%	-	7%
estimated expenditure	Health information and technology	4%	-	4%
	Universal access to health	43%	-	43%
	Disease control and risk management	12%	-	12%
	Family and community health	9%	-	9%

## BELIZE

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Communicable diseases, prevention and control.
- > Prevention and control of lifestyle-related health problems, including factors affecting vulnerable groups.
- > Health systems and services development.
- > Promotion of safe and healthy environments.
- > Disaster management and risk reduction.

## **PROJECTS**

#### COUNTRY PROGRAM SUPPORT

## **PURPOSE**

To support the delivery of technical cooperation of PWR Belize through the implementation of administrative procedures according to PAHO's policies and regulations.

## **EXPECTED RESULTS**

- Administrative personnel compensated.
- Personnel management strengthened.
- General operation management strengthened.
- Information systems in the office improved.
- Processes supported for the development and implementation of technical programs.
- Operational program strengthened to prevent and control of rabies in the country.
- Food and nutrition security TCC developed and implemented.
- National Health Information System of Belize and Turks and Caicos strengthened.
- Second phase of TCC on the development of National Drug Policy completed.
- TCC on Food Safety Belize-Jamaica developed and implemented.

## DISEASE PREVENTION AND CONTROL

## PURPOSE

To support the Ministry of Health in strengthening its capacity to prevent and control diseases and reduce risks.

- Surveillance system developed for obesity and priority NCDs: diabetes, hypertension, and cancer.
- Technical support provided to address the national response to HIV/AIDS.
- Support provided for the development of policies and legislations to improve road safety.
- Mental health programs of the Ministry of Health and the Mental Health Association strengthened.
- Program strengthened for the surveillance and control of communicable diseases, with special emphasis on dengue, tuberculosis, and malaria.

## HEALTH PROMOTION AND PROTECTION

## PURPOSE

To improve the health and well-being of the Belizean population by means of healthier lifestyles and improved social environments.

#### EXPECTED RESULTS

- Policies, projects, and plans developed to foster healthier lifestyles.
- Support provided for the development and implementation of a comprehensive healthy municipality action plan.
- The effectiveness of the School Health Program strengthened.
- Support provided for the development and implementation of a reproductive health initiative in accordance with the sexual and reproductive health policy.
- Support provided to nutrition activities throughout the biennium.
- Family Violence Program strengthened within the Ministry of Health.
- Support provided to the Food and Nutrition Security Project throughout the biennium.

### HEALTH SYSTEMS AND SERVICES DEVELOPMENT

#### **PURPOSE**

To support the Government of Belize in strengthening the stewardship role of the Ministry of Health.

#### EXPECTED RESULTS

- Performance and capacity of the Ministry of Health improved in discharging the EPHF.
- Support provided for the adoption and application of the methodology for monitoring and evaluating HSR.
- Improved capacity for collecting, processing, and disseminating information and for evidence-based decisionmaking.
- Improved institutional capacity for developing policies for public health planning and management and for improving equity and quality in health.
- Direct support provided for the development of a strategic plan for human resources development and training.
- Support provided for the development and implementation of quality assurance mechanisms.
- Capacity for disseminating information enhanced.
- Programs for the Integrated Management of Childhood Illnesses (IMCI) strengthened and maintained.
- National disaster management capacity increased and support provided to promote risk-reduction initiatives.

## ENVIRONMENTAL PROTECTION AND DEVELOPMENT

## **PURPOSE**

To support the promotion, creation, and conservation of safe and healthy environments.

- Water quality monitoring and treatment program improved.
- National and local capacities strengthened in the management of solid and liquid waste.
- Support provided for the implementation of a national workers' health plan.
- Vector-control program strengthened throughout the country.
- National food safety program strengthened.
- Program implemented on alternatives for malaria control without the use of DDT.

		Regular budget	Other sources	All funds
Total 2002-2003		1,127,800	348,100	1,475,900
Total 2004-2005		1,159,200	-	1,159,200
	Country program support	83%	-	83%
Percentage of	Intersectoral action and sustainable Development	6%	-	6%
estimated expenditure	Health information and technology	1%	-	1%
	Universal access to health	3%	-	3%
	Disease control and risk management	3%	-	3%
	Family and community health	4%	_	4%

## BOLIVIA

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Prevent, control, and reduce communicable diseases, with emphasis on the broad range of diseases that affect the health of the Bolivian population (vector-borne, STI, HIV/AIDS, diarrheal diseases, respiratory infections, tuberculosis, emerging diseases, including resistance to antibiotics, vaccine-preventable diseases, and leprosy).
- > Healthy growth and development. To this end, care will focus on mothers, children, and adolescents. Addressing maternal mortality will be a key objective of technical cooperation, as will infant mortality, with emphasis on neonatal mortality; malnutrition; psychosocial development, and a healthy school environment; and healthy lifestyles for adolescents. Most behavioral risks to health should be addressed by technical cooperation.
- > Disaster preparedness, management, and response. Special attention will be given to mitigation, with the focus on public water utilities, sanitary infrastructure, and health services.
- Achievement of universal access to health systems that are integrated, equitable, and sustainable, reorienting health sector reform to strengthen the steering role of the health authorities and the essential public health functions; and development of human resources for health to help attain greater coverage, effectiveness, and efficiency of health services at the national and institutional levels, prioritizing the first level of care and community participation.
- > Promote the incorporation of health issues in social, economic, environmental, and development policies, promoting the concept of health in human development among policymakers and the drafting of health legislation.
- > Develop and strengthen the capacity to collect, analyze, and disseminate health information, prioritizing vital statistics and data analysis to facilitate timely information on the country's health situation.

## **PROJECTS**

## DEVELOPMENT OF HEALTH POLICIES, SYSTEMS, AND SERVICES

## **PURPOSE**

To make progress toward universal access to an integrated, equitable, and unified health system.

- The steering role of the Ministry of Health and Social Welfare (MHSW) and the different levels of the National Health System strengthened.
- Information generated on financing, expenditure, inequities, and performance of the public sector health system for use by the government when needed.
- A decentralized management model for service networks established, with emphasis on municipal areas and on participation by those who practice traditional healing.
- Policy for the management and development of human resources in health prepared by consensus and submitted to the government.
- Policies and programs for development of health technologies prepared and placed at the disposal of national authorities.
- Administrative processes for the management of this project implemented efficiently and effectively, in accordance with PAHO standards and procedures.

## ENVIRONMENTAL HEALTH AND DISASTERS

## PURPOSE

To improve the quality of environmental health and sanitation services and increase the URAs, as well as the national response capacity to disaster.

#### **EXPECTED RESULTS**

- Technical assistance provided for the organization of environmental surveillance and monitoring systems in departmental health services, including the development and strengthening of the country's toxicology centers.
- Technical support provided for the operation of coordination mechanisms between the MHSW and the Ministry of Sustainable Development and Planning (MSDP).
- Technical assistance provided for the preparation of projects in environmental health and sanitation in municipalities.
- Technical support provided to train personnel from municipalities, departmental health services, and the MHSW in environmental health.
- Technical assistance provided to prepare environmental health projects in indigenous communities.
- Technical support provided for the program to improve water quality nationwide.
- Technical assistance provided to implement the environmental primary care strategy in four of the country's departments.
- Technical assistance provided to train professionals in national universities as specialists in environmental health.
- Technical support provided for the Bolivian Sanitary and Environmental Engineering Association to hold national symposia, congresses, and courses.
- Technical support provided to develop a nationwide campaign to control the environmental hazards of UV radiation.
- Technical support provided for nationwide implementation of the Disaster Control Program.
- Technical support provided for training national institutions (MHSW, MSDP and the National Civil Defense Service—SENADECI) in the prevention of disasters and the mitigation of their impact on health.
- Technical support provided to strengthen the Virtual Health and Environment Library (BVSA Bolivia).
- Technical assistance provided to strengthen the Occupational Health Program of the National Institute for Occupational Health.

#### PREVENTION AND CONTROL OF COMMUNICABLE AND VACCINE-PREVENTABLE DISEASES

## **PURPOSE**

To strengthen public health monitoring, as well as decentralized, participatory, and cooperative management, and maintain vaccination coverage to prevent and control priority and vaccine-preventable communicable, emerging, and reemerging diseases.

- The public health monitoring system installed and operational in the nine departments.
- Decentralized local capacity in the prevention and control of emerging and reemerging communicable diseases developed.
- Instruments and processes prepared that facilitate participation in routine public health monitoring and the
  prevention and control of communicable, emerging, and reemerging diseases, in cooperation with organized
  civil society.
- Research and surveillance of emerging, reemerging, and priority prevalent diseases, and the response to them, initiated and consolidated.
- Follow-up performed of administrative procedures that facilitate technical cooperation to help monitor public health and prevent and control communicable, emerging, and reemerging diseases.

• Support provided to maintain high levels of vaccination coverage with quality biologicals and to implement an active and comprehensive monitoring system.

### **HEALTHY LIFE CYCLE**

#### **PURPOSE**

To reduce the burden of disease and mortality throughout the life cycle, with special emphasis on the socially excluded population.

#### EXPECTED RESULTS

- National capacity to promote a healthy life cycle strengthened.
- The Integrated Management of Childhood Illness strategy, including the neonatal component, consolidated.
- Healthy spaces created for schoolchildren and adolescents.
- A program to reduce mortality in women from maternity-related causes and cervical cancer prepared and carried out.
- The Healthy Municipality Strategy strengthened.
- Food and nutrition policies and programs formulated and implemented.
- Social and public participation processes in under stage-by-stage consolidation within integrated health promotion programs.
- Management of the project's technical-administrative components improved.

### MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

### **PURPOSE**

To efficiently and effectively exercise the administrative dimension of management of the Representative Office.

### **EXPECTED RESULTS**

- The administrative capacity of the PAHO/WHO Representative Office in Bolivia strengthened, with the consequent improvement of administrative processes.
- Management information systems of the PAHO/WHO Representative Office developed and strengthened.
- Use of the Expanded Textbook Program (PALTEX) consolidated in institutions that train health workers through an efficient delivery system for high-quality, scientific instructional materials at prices much lower than market prices.

#### ACCESS TO SCIENTIFIC AND TECHNICAL INFORMATION

## **PURPOSE**

To improve and increase access to scientific and technical information that promotes the country's application and use of information technology.

- Virtual libraries on health, health and the environment, public health, and nursing developed, strengthened, and updated.
- Basic health libraries strengthened in terms of information, documentation, access to the Internet, and technical assistance
- Operating capacity of the Information and Documentation Center of the Representative Office increased and strengthened.

## TECHNICAL COOPERATION AMONG COUNTRIES

## **PURPOSE**

To contribute to the development and strengthening of cooperative relationships in health among countries through support for the formulation and management of technical cooperation projects among countries within the framework of Pan-Americanism.

### **EXPECTED RESULTS**

 Cooperative ties and mechanisms between countries established within the framework of national priorities and regional and subregional commitments, especially in the context of the Andean Health Organization (ORAS), MERCOSUR, and the Amazon Cooperation Treaty.

## SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

## **PURPOSE**

To efficiently and effectively exercise the policy and technical dimensions of the management of the Representative Office.

## **EXPECTED RESULTS**

- Technical-administrative capacity of the PAHO/WHO Representative Office in Bolivia strengthened.
- Decentralization processes of PAHO/WHO technical cooperation strengthened.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		4,568,100	4,657,800	9,225,900
Total 2004-2005		4,727,600	1,103,800	5,831,400
	Country program support	37%	-	30%
	Intersectoral action and sustainable			
Percentage of	Development	12%	-	9%
estimated expenditure	Health information and technology	2%	1%	2%
	Universal access to health	18%	-	15%
	Disease control and risk management	15%	99%	31%
	Family and community health	16%	-	11%

## BRAZIL

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Consolidate the Unified Health System (UHS), strengthening managerial capacity in the three spheres of government and facilitating consensus-building on objectives and results through pacts between UHS managers (bipartite and tripartite), integrated planning and programming activities, and use of the integrated nature of the three levels of care to improve the equity, quality, and efficiency of services, and operationalize prevailing UHS standards.
- > Promote the functional integration of databases and information systems that support health decisions and policies, particularly those for epidemiological and managerial surveillance activities and programs, establishing remote electronic access services, the Virtual Health Library (VHL) and the Integrated Health Information Network (RIPSA).
- > Develop and implement environmental health and sanitation policies to reduce the disease and mortality burden and improve the health and well-being of the population.
- > Strengthen actions and programs to prevent, monitor, and control communicable diseases, particularly vaccinepreventable diseases; STD/HIV; tuberculosis; leprosy; vector-borne diseases such as malaria, dengue, Chagas' disease, yellow fever, and zoonoses, especially, rabies; and food-borne diseases. Strengthen programs geared to reducing risk factors associated with noncommunicable diseases, particularly cardiovascular diseases, cancer, diabetes, hypertension, and obesity.
- > Promote human resource education and training programs based on the Family Health Strategy, and refine regulatory and management, based on the availability of information and the analytical capacity of human resources in health.
- > Make health promotion a national priority, which implies developing public policies that improve factors that constitute health determinants, strengthening intersectoral work and mobilizing sectoral and intersectoral resources for programs and activities at all levels of the State.
- > Strengthen the institutional capacity of the National Agency for Health Surveillance. Ensure a decentralized supply of basic and generic drugs, as well as safe blood and food hygiene. Promote the evaluation of applied technologies in health for rational use by level of care.
- > Strengthen the decentralization of health services by improving the managerial capacity of state health secretariats to technically and financially support the municipalities in the regionalization process, in keeping with operating standards for health care (NOAS-2001), in order to improve the quality of health services and make access to them more equitable. Develop and implement environmental health and sanitation policies to reduce the disease and mortality burden and improve the health and well-being of the population.
- > Promote intersectoral actions that improve health and the quality of life, with emphasis on basic sanitation and environmental protection, strengthening the institutional capacity of the Ministry of Health in environmental health. Undertake actions and programs to protect health workers and prepare for natural and technological disasters.
- > Promote education and training programs for human resources based on the Family Health Strategy, and refine regulatory and management processes based on the availability of information and the analytical capacity of human resources in health.

## **PROJECTS**

## DEVELOPMENT, MANAGEMENT, AND COORDINATION OF TECHNICAL COOPERATION

#### PURPOSE

To design technical cooperation consistent with the country's health needs and priorities, promoting the use of relevant information and inputs fundamental to the public policy-making and decision-making processes, and strengthening basic health care, the Family Health Program, and decentralized management of services as strategic factors in health sector reform.

#### **EXPECTED RESULTS**

- Support provided for informed policy- and decision-making in linked strategic areas of relevance for reducing inequities.
- Technical cooperation projects between Brazil and other countries (TCC) implemented and coordinated, with the participation of the PAHO Representative Office-Brazil to support the negotiating capacity for SGT-11 and technical working groups for MERCOSUR.
- Technical cooperation programs carried out in keeping with national priorities and the PAHO Strategic Plan for 2003-2007, applying human and economic resources in a manner consistent with the work strategies of the Representative Office.
- Different technical cooperation projects coordinated and strengthened within the context of integrated services and basic health care, concentrating activities through the Family Health Program.
- Technical cooperation projects designed to strengthen the state and municipal health secretariats as part of the decentralization of Brazil's health model.
- Creation of an effective functional structure in the PAHO Representative Office with the capacity, adequate infrastructure, and leadership to meet the needs of the technical cooperation program.
- Technical cooperation decentralized, with work plans developed jointly between state and federal health authorities.

### **DEVELOPMENT OF HEALTH SYSTEMS AND SERVICES**

## **PURPOSE**

To design technical cooperation in health services geared to strengthening essential public health functions in the three government spheres, and to restructure the model of care with a focus on health promotion, rational use of technologies, quality assurance, and the reduction of inequalities.

- Support provided for the development of health authority functions in the three spheres of government and the building of public health plans, using the essential public health functions (EPHF) and other methodologies aimed at strengthening federal management and the state and municipal health secretariats, within the framework of decentralizing and regionalizing services.
- Support provided for informed policy-making for health systems and services development through the creation of health observatories and forums, technical cooperation networks, and technical cooperation via the Internet, with the aim of reorganizing personal and public health services, focusing on equity, financial sustainability, solidarity, quality, rational use of technologies, and the democratization of information.
- Support for the planning and organization of personal and public health services through studies and research
  that emphasize the reduction of inequalities in access to regionalized services, health promotion, and quality
  assurance.
- Support provided through analyses, studies, methodologies, and instruments, to improve the skills and expertise
  of UHS managers in evaluating and applying technologies based on needs, clinical protocols, and public health
  studies.

- Support provided for implementation of innovative modalities and methodologies that ensure the quality of
  personal and public health services, basic care, and family health and its relationship to medium and high levels
  of complexity and community public health organizations.
- Through studies, research, and the use of methodologies, support provided for the development of health sector financing models; provider payment models; and analysis of EC29 incentives and trends, including methodologies for the analysis of the cost, production, performance and profitability of programs.

## INFORMATION FOR HEALTH POLICY-MAKING

### **PURPOSE**

To design consistent technical cooperation that strengthens national capacity in health analysis and public policy-making to reduce inequities and inequalities in health and design strategic activities to develop the Unified Health System (UHS).

### **EXPECTED RESULTS**

- National strategic capacity to produce, evaluate, analyze, and disseminate basic data and indicators for health and health trends augmented.
- Models and instruments for epidemiological analysis of health conditions developed and applied to support decentralized management of the UHS, in the Ministries of Health and the municipal health secretariats.
- Document and bibliographic support processes and mechanisms developed for PAHO technical cooperation in the country, coordinated with the Virtual Health Library (VHL) Project of the Latin American and Caribbean Center on Health Sciences Information (BIREME).
- Internal coordination processes developed that use the Internet as an instrument to complement PAHO technical cooperation in Brazil.
- Social communication processes related to PAHO technical cooperation in the country refined, promoting the use of electronic communication technologies, with special emphasis on health promotion and basic health care.

### HEALTH AND ENVIRONMENT

### **PURPOSE**

To provide technical cooperation for upgrading national capacity to address environmental health priorities, with the aim of supporting efforts to reduce inequities in sanitation and environmental quality and control risks within a proactive, intersectoral, and Pan-American management framework that promotes sustainable development.

- Cooperation on health and environment issues coordinated in a manner that facilitates work with other projects and strengthens intersectoral management at the different activity levels.
- Information on health and the environment strengthened, with an emphasis on public policy-making.
- State instruments and methodologies developed to support decentralized intersectoral management in federal, state, and municipal institutions, as well as civil society organizations, in five priority states.
- The primary environmental care strategy incorporated into basic health care activities, particularly the Family Health Program.
- Collaboration in support of a plan to improve the efficiency and effectiveness of environmental sanitation services and controls, with emphasis on communities with higher morbidity and mortality indexes associated with deficient services and controls.
- Support provided to improve the risk management and control, taking into account studies on environmental risk assessment, control of chemical substances, environmental monitoring, and workers' health.

## DEVELOPMENT OF HUMAN RESOURCES IN HEALTH

## PURPOSE

To develop useful technical cooperation consistent with policy priorities for the country's human resources in health, through programs and projects that strengthen the institutional capacity of UHS managers, with an emphasis on the Family Health Strategy.

#### EXPECTED RESULTS

- Support provided to strengthen the decentralization and institutional development of UHS managers in human resource regulation, management, and training in the health sector, especially in the five priority states under the International Classification of Diseases (ICD).
- Collaboration in formulating and implementing training projects in priority areas for the UHS, with emphasis on projects that strengthen the Basic Health Network and the Family Health Strategy.
- Creation and expansion of the country's Observatory Network of Human Resources for Health (ROREHS) promoted, strengthening the use of information in public policy-making and evaluation.
- Collaboration in formulating, implementing, and evaluating cooperation projects signed between PAHO and the Ministry of Health or other institutions in the health, education, and research sectors.

### **HEALTH PROMOTION**

#### **PURPOSE**

To develop useful technical cooperation consistent with the consolidation and expansion of health promotion policies and mechanisms and that is appropriate to the evaluation, strengthening and application of those policies and mechanism at all levels of the system, particularly major urban areas.

## **EXPECTED RESULTS**

- Planning and execution of the technical cooperation process for the health promotion project coordinated.
- The use of decentralized technical cooperation supported for public health policies in selected municipalities from the states, particularly in major urban areas.
- Support provided to develop methodologies for evaluating public health policies that assist in local decision-making, particularly in large urban areas.
- Support provided to integrate health promotion into basic health care services, with emphasis on the Family Health Strategy.

#### ESSENTIAL DRUGS AND OTHER HEALTH INPUTS

#### **PURPOSE**

To prepare useful technical cooperation consistent with national priorities on the regulation, management, monitoring, and evaluation of the use of drugs, other health inputs, blood, public health laboratories, and ionized radiation, promoting the use of relevant information; strengthening basic health care, the Family Health Program and decentralized management of services; and fostering harmonization processes in the Region and the development of its human resources.

- Coordination processes between the three spheres of government and other actors developed to formulate, implement, and evaluate policies on drugs and other essential health inputs to ensure equitable access to drugs as well as their quality and rational use.
- Activities carried out to improve decentralized management of UHS pharmaceutical services, especially in the
  five states designated as priorities for decentralized technical cooperation, in order to improve access to
  essential drugs, with emphasis on basic care and the Family Health Program.

Regulation, monitoring and evaluation of the use of drugs and other inputs strengthened, together with
coordination with teaching institutions, professional organizations, and other entities to promote the rational use
of drugs by those who prescribe and dispense them and by communities, promoting the mass communication
strategy through telematic media.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		10,768,200	20,241,200	31,009,400
Total 2004-2005		8,716,200	4,668,000	13,384,200
	Country program support	28%	-	18%
	Intersectoral action and sustainable			
Percentage of	Development	16%	-	11%
estimated expenditure	Health information and technology	12%	8%	10%
	Universal access to health	12%	60%	29%
	Disease control and risk management	17%	28%	21%
	Family and community health	15%	4%	11%

## **CANADA**

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Canada's active participation in regional and global programs, both within and outside Canada.
- > Sharing Canadian expertise and approaches with other countries.

## **PROJECTS**

## REGIONAL COOPERATION ACTIVITIES

## **PURPOSE**

To improve national, regional, and global programs by using Canadian expertise and approaches and facilitating Canadian participation.

### EXPECTED RESULTS

- Greater number of Canadian experts involved in technical cooperation projects.
- Greater participation by Canada in regional and global programs.

## CANADIAN AWARENESS OF AND INVOLVEMENT IN PAHO

## **PURPOSE**

To mobilize technical, institutional, and financial resources from Canada in support of PAHO programs, to enhance Canadian awareness and knowledge of PAHO, and to increase Canadian participation in PAHO programs.

## **EXPECTED RESULTS**

Canadian support for, participation in, and knowledge of PAHO programs markedly increased.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		851,600	ı	851,600
Total 2004-2005		809,900	-	809,900
Percentage of	Country program support	7%	-	7%
estimated expenditure	Universal access to health	93%	-	93%

## **CARIBBEAN**

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Health systems improvements, including the management of human resources.
- > Noncommunicable disease management.
- > HIV/AIDS program implementation of an expanded response.
- > Mental health program expansion.
- > Communicable disease management.
- > Environmental health and related conditions management.
- > Family health management for targeted interventions.

## **PROJECTS**

### MENTAL HEALTH

#### PURPOSE

To strengthen the reform of mental health systems.

## **EXPECTED RESULTS**

- Support provided to promotional campaigns for selected mental health and substance abuse issues.
- Support provided to training programs to facilitate community-based mental health.
- Establishment of mental health surveillance and information systems facilitated.
- Direct technical support provided and project coordinated and monitored effectively.
- Support provided to surveillance and information systems to facilitate planning programs for the elderly.

## FAMILY HEALTH

#### **PURPOSE**

To provide support to programs that address the health needs of specific population groups.

## **EXPECTED RESULTS**

- Direct support provided to mobilize resources for HIV/AIDS/STI programs.
- Support provided to plans, projects, and policies to strengthen specific programs and services.
- Training programs conducted to facilitate sustainable health initiatives for specific population groups or services.
- Surveillance and information systems to facilitate planning of selected family health programs.
- Direct technical support provided and project coordinated and monitored effectively.

### NONCOMMUNICABLE DISEASE (NCD) PREVENTION AND CONTROL

## PURPOSE

To improve the implementation of NCD prevention, screening, and management programs.

## **EXPECTED RESULTS**

• Support provided to training programs to facilitate NCD prevention and control, including information, education, and communication.

- Support provided to plans, projects, and policies to reduce NCD risk factors and mobilize resources.
- Support provided to plans, projects, and policies to improve management of NCDs.
- Support provided to surveillance and information systems related to NCDs.
- Support provided to research and evaluation studies on selected aspects of NCDs.
- Direct technical support provided and project coordinated and monitored effectively.

#### REORIENTING HEALTH SYSTEMS

### **PURPOSE**

To apply new approaches in planning and to institutionalize them in the ministries of health.

## EXPECTED RESULTS

- Health planning capacity strengthened and reoriented.
- Human resource capacity strengthened to reorient health systems.
- National and subregional information systems strengthened.
- Quality improvement programs strengthened for the delivery and monitoring of services at all levels.
- Appropriate health financing mechanisms modified to achieve equity, sustainability, and efficiency.
- Program implementation monitoring and evaluation mechanisms in place.

## MANAGEMENT OF TECHNICAL COOPERATION

#### **PURPOSE**

To manage technical cooperation.

#### EXPECTED RESULTS

- PAHO/CPC's property efficiently maintained.
- Human resources plans and policies executed.
- The delivery of technical cooperation managed and coordinated at the country and subregional levels.
- Information Systems and Technology optimized at the CPC Office.
- CCH and CARICOM collaboration program conducted.
- Direct technical cooperation expanded to promote the production and dissemination of health information.
- TCC projects in selected areas designed, approved, and implemented.

## ENVIRONMENTAL HEALTH (EH) AND DISASTERS

## PURPOSE

To enhance the capacity to implement modern practices in the management of environmental health threats and risks.

- Support provided to national programs to improve EH management.
- Support provided to advocacy efforts to modernize EH management.
- Support provided to the subregional human resources development plan for EH professionals at the country and subregional levels.
- Support provided to policy and legislation models in selected CCH priority areas, including in disaster management.
- Capacity to manage disaster issues strengthened.
- Project coordinated and monitored effectively.

## HEALTH SECTOR REFORM PROJECT FOR OECS MEMBER COUNTRIES FSP 2000-89

## **PURPOSE**

To reform the health systems of OECS member countries to improve the efficiency, effectiveness, and quality of services delivered to the population.

#### EXPECTED RESULTS

- Support provided for the introduction of methods, models, and technologies to enhance the capacity of OECS countries to plan and implement health reform training programs.
- Electronic directory of health services and technologies made available in OECS member countries, and selected referral centers in the Caribbean made operational and accessible to all OECS member countries.
- Support provided for the introduction of plans, policies, and projects based on best practices to strengthen
  institutional arrangements for accessing shared services between OECS member countries and Caribbean
  referral centers.
- Models, methods, and technologies introduced to establish an OECS-wide cancer registry.
- Methods, models, and technologies to strengthen the capacity of health providers and ministries of health in OECS states to establish and monitor CQI programs for the health services introduced.
- Project execution managed in accordance with the Memorandum of Understanding signed by OECS and PAHO.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		6,990,100	1,497,200	8,487,300
Total 2004-2005		7,062,800	50,000	7,112,800
	Country program support	38%	-	38%
	Intersectoral action and sustainable			
Percentage of	Development	10%	100%	11%
estimated expenditure	Health information and technology	10%	-	9%
	Universal access to health	17%	ı	17%
	Disease control and risk management	14%	-	14%
	Family and community health	11%	-	11%

## **CHILE**

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- > Study of health needs, expectations, and objectives.
- > National Plan for Equity.
- > National Program to Redesign the Social Protection Network in Health.
- > Guaranteed health rights and commitments.
- > Quality of health care (benefits and providers).
- > National program for health services and for development of the care network.
- > State policy and the National Program for Health Promotion.
- > Modernization and labor relations policy.
- > Modernization of public health sector management.
- > Modernization of Health Sector Programming and Management.
- > Development and organizational modernization of the Ministry of Health.
- > Sectoral financial/budgetary administration.
- > Development of information systems and health statistics.
- > Development of a national policy for health research.

## **PROJECTS**

## MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

### **PURPOSE**

To manage the Representative Office for national health development.

## EXPECTED RESULTS

- Lines of work and activities appropriate to the technical and administrative implementation of technical cooperation in the country developed.
- Lines of work developed for the formulation, operation, and improvement of the technical cooperation model in keeping with the needs identified by the situation analysis of the country and PAHO's priorities and strategies.

## HEALTH SYSTEM DEVELOPMENT

### **PURPOSE**

To strengthen the essential public health functions and clarify the roles of the different components of the health system, strengthening primary health care within the framework of modernizing management.

- Policy-making and standards supported and their application evaluated in terms of the steering role and
  regulatory functions of the Ministry of Health, at a minimum in the areas of accrediting suppliers, investments,
  drugs, and health technology.
- Development of organizational models for health systems and services supported, at a minimum in the areas of coordination between levels, health care financing, and citizen participation.
- A strategic proposal for human resources implemented within the context of health sector reform, including public health training centers.

- Graduate fellowship program between the Ministry of Health and the Representative Office developed and adapted to the strategic proposal for human resources.
- Low-cost access to scientific publications and medical instruments consolidated for health workers through the Expanded Textbook Program (PALTEX).

#### HEALTH PROMOTION AND PROTECTION

### **PURPOSE**

To incorporate health promotion as a key element in health reform objectives, as well as into family and general public health, mental health, and food and nutrition, promoting an approach focused on life and family cycles and gender.

### **EXPECTED RESULTS**

- Participation of all actors involved in health promotion supported, with programming emphasis on family and general public health, mental health, and disability, helping to strengthen communities and action in health, develop partnerships with critical sectors, and mobilize resources.
- Implementation of health promotion policies and plans of action strengthened, using strategies such as healthy
  settings (schools, workplaces, and municipalities), and fostering intersectoral activities and the creation and
  strengthening of networks.
- Research, evaluation, and monitoring of interventions.
- Support provided for community actions geared to strengthening the health of the population and developing personal skills.
- Scientific and technical information disseminated on technical cooperation from PAHO, the Representative Office, and other actors involved in information management.

## SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

## **PURPOSE**

To develop sound public policies and support for reform. To promote the sustainable development of sound public policies within a framework of equity, strengthening decentralization, intersectoral approaches, and social participation.

## **EXPECTED RESULTS**

- Opportunity for dialogue and analysis of strategic aspects of sectoral reform—such as an orientation framework for sound public policy-making with an emphasis on equity and gender—maintened and expanded.
- Strategic orientations for health sector reform defined and negotiation and consensus-building initiated.
- Support provided for strengthening health legislation.

## CONTROL OF RISKS AND THREATS

## **PURPOSE**

To strengthen national and local capacity in the health sector to prevent and control risks and threats to people and the environment, contributing to the achievement of national health objectives and using public health monitoring as an instrument for policy-making.

## EXPECTED RESULTS

Support provided for the consolidation of national plans for the prevention, control, and eradication of
communicable and noncommunicable diseases and for strengthening local implementation, with special
attention to reducing the equity gap.

- Support provided for implementing epidemiological surveillance, statistical, and health information systems at the national and regional level.
- Capacity strengthened and consolidated for diagnosis, research, and analysis of the different institutions involved in health.

#### ENVIRONMENTAL HEALTH

### **PURPOSE**

To improve the response capacity and influence of the health sector at the central, regional, and local levels in regard to environmental health, occupational health, and disasters, fostering decentralized and intersectoral work that involves citizen participation and makes it possible to improve equity among the population in terms of health and the environment.

## **EXPECTED RESULTS**

- Greater capacity developed for the exercise of public health functions in environmental health, through a decentralized, intersectoral, and participatory approach that facilitates more effective and equitable management in environmental health.
- Support provided for intrasectoral and intersectoral development activities in occupational health, in terms of standards for control, surveillance, promotion, training, and information technologies at the national level.
- Support provided for the modernization of health sector disaster programs at the structural and programming levels, using a focus that is participatory, comprehensive, intersectoral, and decentralized in terms of preventing and mitigating natural and technological disasters, as well as responding to them.
- Incorporation of primary environmental care into health sector activities at each level promoted, using an
  intersectoral and participatory approach. Support also provided for developing intermediary agencies such as
  the Eco-Club Network and the Municipal Network for Primary Environmental Care, as well as for cooperation
  among countries.

## **EQUITY, GENDER, AND REFORM**

## **PURPOSE**

To incorporate the gender perspective into public health policies in the context of the reform by generating knowledge, raising awareness about this issue, making this approach an institutional mechanism, and encouraging the participation of civil society.

- Projects sent to Parliament incorporate aspects that foster the eradication of gender risks and promote standards that adequately operationalize gender criteria.
- With the collaboration of academia, the women's health movement, and other civil society actors, a Monitoring
  Observatory for reform policies established, with operations based on the application of a matrix of agreed upon
  gender indicators, and on the issue and broad dissemination of annual reports that promote gender sensitivity.
  Initial activities focused on the metropolitan region, with subsequent establishment of two regional
  workstations.
- Official entities established for civil society that facilitate citizen participation in health, including input in decisions and evaluations affecting normal operations.
- Studies produced on priority issues that promote gender sensitivity, such as use of time, exercise of the right to health, mental health, etc.
- Efforts made to promote permanent interest in gender and equity in health in the mass media, both currently and in the longer term.

- Through joint work with Chile's public health system (FONASA) and the Central Bank, methodologies developed that raise the profile of the household contribution—particularly that of women—to the national accounts, especially in terms of unremunerated health care delivery, with a view to adapting the model of care and the welfare system and procuring social recognition of domestic work carried out in the home.
- Through cooperation, sensitization, and feedback with decision-makers, universities, women's organizations, and other elements of civil society involved with the gender in health program, support provided to raise public awareness about gender issues and take gender into account in health sector policies and practices. This requires that the project develop supportive advocacy mechanisms such as inputs for negotiations, and that it help to strengthen civil society as an informed advocate for health. It also requires the creation of opportunities and influence mechanisms, and monitoring of the situation.
- The experience of the project in Chile will have contributed to the development of projects in other countries of the Region, especially Peru and the Central American countries.

		Regular	Other	All
		budget	sources	funds
Total 2002-2003		2,577,900	457,600	5,643,700
Total 2004-2005		2,294,500	-	2,294,500
	Country program support	44%	-	44%
	Intersectoral action and sustainable			
Percentage of	Development	8%	-	8%
estimated expenditure	Health information and technology	3%	-	3%
	Universal access to health	24%	-	24%
	Disease control and risk management	21%	-	21%