COLOMBIA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- The Quadrennial Public Health Plan for 2002-2006, which includes eight basic points based on national health priorities.
- Resolution of the hospital network crisis.
- Cooperation and coordination between territorial entities.
- Strengthening of the Public Health Surveillance and Information System.

PROJECTS

DEVELOPMENT, MANAGEMENT, AND ADMINISTRATION OF PAHO IN COLOMBIA

**PURPOSE**
To have physical and logistical facilities and support personnel to carry out the technical cooperation to the country.

**EXPECTED RESULTS**
- Adequate administrative processes and working conditions in place to meet technical cooperation requirements, as the available resources permit.

PREVENTION, CONTROL, AND REDUCTION OF DISEASES

**PURPOSE**
To strengthen functional groups at the central level and foster coordination with territorial entities on activities to prevent, control, and reduce diseases of importance to public health, with emphasis on priority groups, irrespective of gender, social category, and cultural characteristics, and with a view to reducing injuries and their determinants.

**EXPECTED RESULTS**
- Epidemiology used by functional groups as an instrument for decision-making and for strengthening prevention, surveillance, and control of communicable diseases of importance to public health, with the aim of helping to attain the indicators in the Strategic Plan of the Ministry of Social Protection.
- Activities carried out by the functional groups in the departments in their areas of specialization for health promotion and the prevention, surveillance, and control of noncommunicable diseases, with emphasis on those assigned priority in the Strategic Plan of the Ministry of Social Protection.
- Plans consolidated for the prevention, control, and eradication of vesicular and emerging diseases in domestic animals, diseases which jeopardize food production and the international livestock trade.
- Intersectoral plans and programs implemented, aimed at understanding the extent of foodborne diseases (FBDs), with this information used in policy-making.
- Programs for the control of endemic zoonoses and emerging and reemerging diseases implemented, in coordination with relevant entities, including producers.
## ENVIRONMENTAL HEALTH AND HEALTHY SPACES

**PURPOSE**
To strengthen national capacity to manage and implement activities for improving sanitary conditions in physical and social environments to better reduce environmental risks that jeopardize the health of the Colombian population.

**EXPECTED RESULTS**
- Technologies and instruments identified that increase the coverage and quality of water and sanitation services for rural and vulnerable populations.
- Registry of accidents and occupational diseases among the working population strengthened, along with risk assessment and the development of programs to support workers in the informal sector.
- Risk assessment, prevention, and public awareness campaigns strengthened to inform the people about poisoning and environmental pollution from various physical, chemical and biological agents that affect air, soil, and water quality.
- National capacity strengthened through development of the instruments, plans, standards, and information systems proposed for the national environmental health plan (PLANASA), which will allow for implementation of the environmental health program in health and environmental institutions.
- Plans, policies, and programs aimed at making environments healthier implemented through the promotion of healthy lifestyles, sound public policy-making, and the reduction of risks for the vulnerable population.

## HEALTH INFORMATION

**PURPOSE**
To strengthen the country’s capacity to generate, analyze, disseminate, and use health information for policy-making in public health administration.

**EXPECTED RESULTS**
- Development plans for essential public health functions 1 and 2 implemented, and plans corresponding to function 10 drawn up by the end of 2005.
- Systems created to generate strategic information that will make it possible to anticipate events and better prepare appropriate responses.
- Capacity strengthened to analyze mortality profiles and trends, the disease burden, measurement of inequalities, violence, health situation analysis in primary health care, and disasters.
- Situation rooms developed as a strategic instrument for administrative use at the departmental level. Scientific and technical information and communications processes (the CDOC database, Virtual Health Library, and Web page) consolidated.

## FAMILY AND COMMUNITY HEALTH

**PURPOSE**
To promote public health interventions that improve family and community health throughout the life cycle, with emphasis on child and adolescent health, sexual and reproductive health, and nutrition, by strengthening functional groups at the national, departmental and municipal levels and by supporting the preparation and coordination of sound public policies and strategic partnerships to address the needs of the most vulnerable population groups.

**EXPECTED RESULTS**
- Critical support strategies implemented for the Strategic Plan for the Expanded Program on Immunization (EPI), to achieve useful vaccination coverage in all departments and municipalities in the country.
**DEVELOPMENT OF AND UNIVERSAL ACCESS TO HEALTH SERVICES**

**PURPOSE**
To strengthen the steering and managerial capacity of health systems and services at the national and departmental levels.

**EXPECTED RESULTS**
- Decentralized, integrated management models developed in consultation with the Ministry of Health in departments selected on the basis of epidemiological, social, and sanitary priorities.
- Basic health models care based on integrated departmental service networks operating at the central level, with intrasectoral and intersectoral coordination and social participation, and with an emphasis on primary care and community health in five priority departments.
- Public health policies developed for exercising essential public health functions under the supervision of national and departmental health authorities.
- General System for Social Security in Health developed to achieve universal health coverage, quality health services, and a sustainable financial system.
- Monitoring and research on the Colombian health system reform process conducted and disseminated.

**HEALTH IN DISASTER AND EMERGENCY SITUATIONS**

**PURPOSE**
To cooperate to improve health and access to services of victims of disasters and humanitarian crises, particularly displaced populations.

**EXPECTED RESULTS**
- Management of risk and mitigation of the impact of disasters on health strengthened in areas identified as critical by national and local authorities.
- Institutional capacity to respond to the health needs of displaced and vulnerable populations strengthened in departments where PAHO has field offices.
- Support provided for territorial technical cooperation initiatives.
SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

**PURPOSE**
To identify needs and programs and explore opportunities for technical cooperation that are consistent with the guidelines of the National Development Plan and the strategic plans of the Ministry of Social Protection and PAHO.

**EXPECTED RESULTS**
- Specific cooperation initiatives adopted by PAHO in conjunction with its various counterparts periodically evaluated.
- Knowledge and skills required for performing routine functions attained by personnel.
- Effective use by the countries of technical cooperation projects to strengthen institutional capacity in strategic areas, with priority assigned to bordering countries.

**RESOURCES (US$)**

<table>
<thead>
<tr>
<th></th>
<th>Regular budget</th>
<th>Other sources</th>
<th>All funds</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>Percentage of estimated expenditure</th>
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<th>Other sources</th>
<th>All funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country program support</td>
<td>34%</td>
<td>-</td>
<td>34%</td>
</tr>
<tr>
<td>Intersectoral action and sustainable Development</td>
<td>11%</td>
<td>-</td>
<td>11%</td>
</tr>
<tr>
<td>Health information and technology</td>
<td>14%</td>
<td>-</td>
<td>14%</td>
</tr>
<tr>
<td>Universal access to health</td>
<td>15%</td>
<td>-</td>
<td>15%</td>
</tr>
<tr>
<td>Disease control and risk management</td>
<td>19%</td>
<td>-</td>
<td>19%</td>
</tr>
<tr>
<td>Family and community health</td>
<td>7%</td>
<td>-</td>
<td>7%</td>
</tr>
</tbody>
</table>
COSTA RICA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

> Strengthen and improve interventions aimed at sustaining or increasing gains in reducing infant mortality, maternal mortality, communicable diseases, and nutritional deficiencies.
> Promote construction of a culture of health, with emphasis on health promotion and promotion of healthy lifestyles in individuals and the population at large.
> Prevent and treat noncommunicable diseases and address their risk factors.
> Promote mental health using a comprehensive approach, with emphasis on social violence.
> Improve equity, access, quality, and ethical standards in the health services, with emphasis on primary care.
> Improve environmental health, with emphasis on basic sanitation and integrated water resources management.
> Promote actions aimed at reducing vulnerability to disasters.
> Consolidate health sector structure and operations.
> Manage investment, expenditure, and financing according to health sector policies and priorities.
> Consolidate the National Health Surveillance System.

PROJECTS

MANAGEMENT AND COORDINATION OF TECHNICAL COOPERATION

PURPOSE
To provide effective, high-quality technical cooperation.

EXPECTED RESULTS
• PAHO technical cooperation programs and projects, formulated, directed, and implemented under the Strategic Plan of the Organization, based on the situation in the country.
• Operations of the Representative Office guaranteed through efficient, effective management of administrative procedures to support technical cooperation.
• Management information systems and staff development in the Representative Office implemented and strengthened.

DEVELOPMENT OF PUBLIC POLICIES AND INFORMATION IN THE HEALTH SECTOR

PURPOSE
To contribute to the strengthening of national capacity to use and analyze health information for the policy-making and evaluation and decision-making in the public health management process.

EXPECTED RESULTS
• National Health Surveillance System linked to information systems that strengthen capacity for health situation analysis.
• Plans strengthened for the development of health sector analysis components on standards, regulations, functions, strategies, and procedures.
• Coordination between institutions and national and regional teams strengthened for the formulation, implementation, and evaluation of sectoral policies within the framework of sectoral analysis.
**HEALTH SYSTEMS AND SERVICES**

**PURPOSE**
To strengthen the sectoral steering role for exercise of the essential public health functions, ensuring universal access to quality health services, financial management, and the regulation of personal and population-based health service delivery.

**EXPECTED RESULTS**
- The functions, strategies, and procedures needed to exercise the sectoral steering role will have been validated, including the essential public health functions, defined in a participatory manner by the pertinent governmental agencies and applied at the national, regional, and local levels.
- Mechanisms and procedures to ensure access to health care for the excluded population defined and applied in the cantons with a lower social development index.
- Available information on financing, expenditure, and investments in health updated and used in the sector, based on the criteria of equity and quality.
- Measures for continuous improvement of the quality of care incorporated at various levels of the health system, with emphasis on common reasons for consultations or high morbidity.

**POPULATION AND FAMILY HEALTH**

**PURPOSE**
To implement policies and strategies for health promotion, and protection from the standpoint of human development.

**EXPECTED RESULTS**
- Strategies for health promotion and protection aimed at improving family health strengthened within the framework of sectoral programs and projects and the healthy spaces and settings initiative, with emphasis on priority areas and cantons.
- Policies and strategies aimed at strengthening the Nutrition and Food Security Project implemented, with emphasis on priority areas and cantons.
- Policies, strategies, plans, programs, and sectoral projects developed for preventing and addressing violence, (including domestic violence) and the use of tobacco and other drugs, with emphasis on priority areas and cantons.

**PREVENTION AND CONTROL OF COMMUNICABLE AND NONCOMMUNICABLE DISEASES**

**PURPOSE**
To increase national capacity for the prevention and control of priority communicable and noncommunicable diseases in the country.

**EXPECTED RESULTS**
- Capacity for management, prevention, and control of priority communicable and noncommunicable diseases increased at different levels of the system.
- Plans for developing the components of sectoral health analysis strengthened with respect to standards, regulations, functions, strategies, and procedures.
ENVIRONMENTAL PROTECTION AND DEVELOPMENT

**PURPOSE**
To contribute to development, sustainability, and accessibility of drinking water and sanitation services and to the reduction of environmental risks to health as an essential action for sustainable human development.

**EXPECTED RESULTS**
- Reform of the drinking water and sanitation sector, proposed in the PHC sectoral analysis, supported, and the technical capacity of institutions in the environmental protection and development sector strengthened.
- Assistance provided in strengthening health and environment programs and healthy spaces initiatives, with citizen participation, at the different levels of institutional action in the sector.
- The preparation of technical proposals and programs to reduce the vulnerability of the health sector infrastructure fostered and strengthened.

DISASTER PREPAREDNESS

**PURPOSE**
To reduce the disaster vulnerability of the health sector in Central America.

**EXPECTED RESULTS**
- Disaster preparedness in the health sector improved, in coordination with other sectors. Mitigation of the impact of disasters on the health sector promoted.
- Health sector response to disasters improved.

WOMEN, HEALTH, AND DEVELOPMENT (SUBREGIONAL)

**PURPOSE**
To strengthen the subregional capacity to analyze the health situation and its determinants, with the aim of reducing gender inequities.

**EXPECTED RESULTS**
- The capacity of ministries of health and statistical offices strengthened, incorporating the gender approach into collection, analysis, and use of health data.
- Strengthened capacity of various actors for monitoring and promoting the gender equity approach in health policies and programs, within the context of health sector reform.
- The comprehensive model for addressing gender violence consolidated and the model also used to address gender and mental health issues.
- Processes to produce and disseminate information, education, and communication on gender and health designed and facilitated, for raising awareness and training.
- Technical cooperation for incorporating the gender equity approach in the programs and policies of PAHO, regional and national offices, and Member States facilitated.
## Resources (US$)

<table>
<thead>
<tr>
<th></th>
<th>Regular budget</th>
<th>Other sources</th>
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</tr>
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<td>Total 2004-2005</td>
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<table>
<thead>
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<th>Percentage of estimated expenditure</th>
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<th>Other sources</th>
<th>All funds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Country program support</td>
<td>35%</td>
<td>100%</td>
<td>36%</td>
</tr>
<tr>
<td>Intersectoral action and sustainable Development</td>
<td>14%</td>
<td>-</td>
<td>14%</td>
</tr>
<tr>
<td>Health information and technology</td>
<td>11%</td>
<td>-</td>
<td>11%</td>
</tr>
<tr>
<td>Universal access to health</td>
<td>13%</td>
<td>-</td>
<td>13%</td>
</tr>
<tr>
<td>Disease control and risk management</td>
<td>13%</td>
<td>-</td>
<td>12%</td>
</tr>
<tr>
<td>Family and community health</td>
<td>14%</td>
<td>-</td>
<td>14%</td>
</tr>
</tbody>
</table>
CUBA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

> Continue strengthening municipal development in terms of public health through local government, social, and community participation, strengthening the primary health care subsystem and advancing family medicine, priority programs, and food security.
> Prioritize the development of human resources for the National Health System, emphasizing integrated general medicine and the development of the National School of Public Health.
> Strengthen the National Health System for sustainable development of health and the quality of life and the promotion of health and the network of municipios.
> Promote and systematize environmental health actions aimed at protecting environmental and population health, including the struggle against disease vectors, prioritizing measures to combat *Aedes aegypti*.
> Prioritize the National Immunization Program, maintaining national coverage according to the national vaccination plan.
> Prioritize the Program on Communicable Diseases, with emphasis on STIs, HIV/AIDS, tuberculosis, and zoonoses.
> Develop the National Drug Program, as well as natural and traditional medicine, pharmacoepidemiology, and research on the health system and drug services.
> Strengthen national capacity with respect to scientific, technical, and health information for monitoring and analyzing the health situation.
> Enhance national plans for disasters.
> Bolster international cooperation efforts to mobilize financial, physical, human, political, and institutional resources, favoring local, national, and international initiatives aimed at addressing national priorities.

PROJECTS

MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

**PURPOSE**
To improve managerial capacity in the Representative Office to the development needs of the National Health System.

**EXPECTED RESULTS**
- The project for full development of the Representative Office implemented.

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

**PURPOSE**
To support national health development.

**EXPECTED RESULTS**
- Staff development program implemented.
- Project coordination activities implemented.
- Projects for technical cooperation among countries and resource mobilization in general implemented.
- Scientific and technical capacity of the National Health System and other health-related sectors promoted internationally.
## Municipal Development

### Purpose
To help strengthen local development processes through the decentralization of technical cooperation, prioritizing improvements in primary health care, intersectoral action, and social and community participation.

### Expected Results
- Contribution made to annual monitoring and consolidation of the Municipal Development Program (MDP), as well as to decentralization within the municipios to health areas and family medicine programs, as well as People’s Councils and Circumscriptions.
- Health and development activities consolidated in the projects and centers, and support provided for their expansion to other economic areas with common issues.
- Decentralization of technical cooperation strengthened and the experience of the focal points for cooperation systematized. Territorial decentralization consolidated, and the decentralization of health programs, research, education, and human resources development expanded and intensified.
- Local initiatives developed through multisectoral projects for solving priority problems in health promotion, environment, gender, adolescent health, health of older adults, health services, rehabilitation, and other areas suggested by local governments and the Ministry of Public Health.

## Strengthening of the National Health System

### Purpose
To effectively guide technical cooperation to improve the performance of the NHS.

### Expected Results
- Problem-solving capacity improved with respect to knowledge of the situation and health surveillance, as well as the control of risks and threats, at the national and subnational levels of the NHS and other sectors related to health and environment.
- Health promotion strategy strengthened, emphasizing multisectoral community participation, with the aim of improving the quality of life of the population.
- Regulatory and control processes strengthened, as well as health policy, planning, and management development at national and subnational levels of the NHS.
- Technical cooperation to improve the quality of health services at the national level strengthened, ensuring their efficiency and effectiveness and raising the level of popular satisfaction.
- Scientific and technical capacity strengthened through human resources development and the national research process.
## Resources (US$)

<table>
<thead>
<tr>
<th></th>
<th>Regular Budget</th>
<th>Other Sources</th>
<th>All Funds</th>
</tr>
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<tr>
<td>Total 2002-2003</td>
<td>2,513,600</td>
<td>146,500</td>
<td>2,660,100</td>
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<td>Total 2004-2005</td>
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<td>69,000</td>
<td>2,455,400</td>
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<table>
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<tr>
<th>Percentage of estimated expenditure</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Country program support</td>
<td>33%</td>
<td>100%</td>
<td>35%</td>
</tr>
<tr>
<td>Intersectoral action and sustainable Development</td>
<td>10%</td>
<td>-</td>
<td>10%</td>
</tr>
<tr>
<td>Health information and technology</td>
<td>7%</td>
<td>-</td>
<td>6%</td>
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<tr>
<td>Universal access to health</td>
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<td>41%</td>
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<tr>
<td>Disease control and risk management</td>
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<td>3%</td>
</tr>
<tr>
<td>Family and community health</td>
<td>5%</td>
<td>-</td>
<td>5%</td>
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</tbody>
</table>
# Dominica

## National Priorities for PAHO Technical Cooperation

- Performance level of the Ministry of Health.
- Safe physical environments.
- Skills development opportunities at the Ministry of Health.
- Comprehensive emergency management plan.
- Low quality of health care rating in EPHF.
- High Aedes aegypti infestation/threat of malaria outbreak.
- Implementation and enforcement of laws.
- Monitoring and surveillance systems.
- Increased mortality rates due to cancer, hypertension, and diabetes.
- Health information dissemination.
- High prevalence of obesity in the 0-5 years age group.

## Projects

### Health Systems Development

**Purpose**

To improve the level of performance of the Ministry of Health.

**Expected Results**

- Support provided to plans, projects, and policies to strengthen the Ministry of Health's capacity to monitor and improve the quality of health care.
- Support provided for the adoption of plans, policies, and projects to strengthen the Ministry’s human resource capacities.
- Support provided for the introduction of health financing models, methods, and mechanisms.
- Program implementation, and monitoring and evaluation mechanisms in place.
- Plans, projects, and policies developed to sustain implementation of healthy community and health promotion initiatives.

### Chronic Noncommunicable Diseases (CNCD)

**Purpose**

To develop and implement the national CNCD program.

**Expected Results**

- Support provided for the introduction of plans, policies, and projects for the improved and effective management of selected CNCD (diabetes, hypertension, and selected cancers).
- Support provided to methods, models, and technologies for developing national screening programs for diabetes, hypertension, selected cancers, and obesity.
- Methods, models, and technologies introduced to improve compliance by users and providers.
- Plans, policies, and projects introduced to reduce the prevalence of obesity in children from 0 to 5 years old.
SAFE PHYSICAL ENVIRONMENT

PURPOSE
To promote a safe physical environment.

EXPECTED RESULTS
- Support provided to plans, policies, and projects to improve enforcement mechanisms.
- Support provided to policies and plans to strengthen institutional capacities in monitoring and surveillance.
- Public awareness and education program strengthened to address vector control.
- Support provided to plans, policies, and projects to improve systems for testing and monitoring the emergency management plan.

RESOURCES (US$)

<table>
<thead>
<tr>
<th>Percentage of estimated expenditure</th>
<th>Regular budget</th>
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<td>Total 2002-2003</td>
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<td>288,600</td>
</tr>
<tr>
<td>Total 2004-2005</td>
<td>273,700</td>
<td>-</td>
<td>273,700</td>
</tr>
</tbody>
</table>

Country program support: 7%  Other sources: -  All funds: 7%
Intersectoral action and sustainable Development: 10%  Other sources: -  All funds: 10%
Universal access to health: 58%  Other sources: -  All funds: 58%
Disease control and risk management: 13%  Other sources: -  All funds: 13%
Family and community health: 12%  Other sources: -  All funds: 12%
<table>
<thead>
<tr>
<th>NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>&gt; Guarantee ongoing governance in this sector. Ensure the orderly, rational transfer of authority (change of administration) to new public health management for 2000-2004, as well as the continuity of current policies, programs, and health activities considered to be proven, adequate, timely, and pertinent, informing public and civil society organizations working in public health about the health situation and the plans and priorities of the new authorities.</td>
</tr>
<tr>
<td>&gt; Expand health services coverage through the primary care strategy. Develop a family and community care model for primary care for identified, territorially defined populations, under the leadership of the Public Health and Social Assistance Council (SESPAS). Organization and forms of operation under this model should provide for sustainability through diverse means of financing, from public funds, mixed funds (subsidized-contributory), or contributory funds (social security). Links with other health services, within the context of the reorganization and modernization of the health sector, will be supported through the primary care strategy.</td>
</tr>
<tr>
<td>&gt; Reorganize and modernize the National Health System. Define the functions and relationships of institutions in the sector, gradually and progressively advancing the principle of the separation of the steering role, health service delivery, and financing functions.</td>
</tr>
<tr>
<td>&gt; Develop and modernize the regulatory framework for the health sector. Based on the strategic objectives of reorganization and modernization of the National Health System, support and promote approval of the general health legislation bill; develop regulations to implement the general health act and harmonize the social security bill with the general health act. Develop and strengthen the sectoral steering role of SESPAS. Reorganize, develop, and modernize SESPAS, with special emphasis on: management of planning, implementation, and supervision; human resources administration; financial and budgetary management; and organization and management of primary and hospital health services, as well as development of a master training plan for these Purposes.</td>
</tr>
<tr>
<td>&gt; Decentralization of SESPAS management. Development of SESPAS management capacity through the creation of regional oversight offices, with the mission of supervising and evaluating operations, and providing support for maintaining of networks and training human resources. Also, by strengthening provincial health bureaus, with executive and administrative missions for budgetary programming, formulation, and execution, local reallocation of resources, and health service delivery.</td>
</tr>
<tr>
<td>&gt; Strengthening the network of specialized health services. Modernization of the public hospital network and strengthening their response capacity by linking them with cooperative networks of multifunction providers (public-private cooperation) at the provincial and district levels, coordinated through new structures for governance, administration, and self-management via new hiring mechanisms and service agreements, management information systems, quality assurance and logistical support for supply of inputs, and management and administrative mechanisms.</td>
</tr>
<tr>
<td>&gt; Promotion and development of social participation, supporting and contributing to development, strengthening and creating social solidarity networks in the health area, and developing national, provincial and municipal health councils, as well as health committees in support of family and community primary care services, national action committees, and all forms of volunteer and private-sector assistance in health services delivery.</td>
</tr>
<tr>
<td>&gt; Promotion of transparency in relations with nongovernmental organizations working in health. Development of the function of evaluating and accrediting NGOs working in health, and the design of legal and legislative frameworks for contracting and co-management with public services.</td>
</tr>
</tbody>
</table>
> Development of response capacity in special public health programs. Develop and strengthen action programming networks, at the provincial and municipal levels, by promoting social participation, the primary care strategy, program decentralization, and local reallocation of resources, with special emphasis on communicable disease control, systematic vaccination of the population, and vector control.

> Strengthening of international cooperation for action in health. Strengthening Dominican participation in the Health Network of Central America and the Dominican Republic (RESSCAD); development of Dominican regional leadership in cooperative health activities in the Caribbean for control and prevention in response to the HIV/AIDS epidemic, as well as progress toward a plan for cooperation with Haiti to develop a bilateral program for a healthy border.

> Reform and modernization of the health sector. Development of pilot programs to apply the stated principles of the Dominican Government’s Policy Charter for Health Sector Reform and Modernization. Regulatory orientation of SESPAS for financial, technical, and interagency coordination and facilitation of the execution of the projects and programs for sectoral reform financed with funds from the World Bank, IDB, European Community (LOME IV), and U.S. Agency for International Development. Assured fulfillment of commitments for the disbursement of national matching funds for loans allocated for this reform. Set-up of a system to monitor and evaluate sectoral reform activities.

**PROJECTS**

**REFORM AND MODERNIZATION OF THE HEALTH SYSTEM, ENVIRONMENTAL HEALTH, AND SOCIAL SECURITY**

**PURPOSE**

To reform and modernize the health, water, and environmental sectors to implement the National Social Security System, and strengthen the steering role of national institutions (SESPAS, Environment Sector, INAPA).

**EXPECTED RESULTS**

- SESPAS assisted in the design of a system for evaluating progress in reform.
- SESPAS provided with a set of standards, instruments, and mechanisms to facilitate the development of its capacity to exercise the steering role and to implement the EPHF.
- Direct support provided for reform and modernization in the health and of drinking water and sanitation sectors, within the framework of technical cooperation.
- Contribution made to the consolidation and dissemination of methods, models, and technologies for the production, dissemination, and use of applied scientific knowledge.
- Surveillance subsystems developed, including the capacity to respond to emerging and reemerging diseases (ERD), and the laboratory network strengthened for consolidation of the National Epidemiological Surveillance System (SINAVE).
- Information subsystems developed, along with the capacity for health analyses involving "the measurement of inequalities" for decision-making.
- Methods, models, and technologies adjusted and developed to improve the performance and heighten the impact of DIGEPI and priority health programs, under the implementation of the Health Act and the Social Security Act.
- Policies, plans, and projects will have contributed to development of public health research on priority problems.
- Policies, plans, and models prepared within the framework of reform and modernization of the health and environment sectors to control environmental risks.
• Methods, models, and technologies will have contributed to adequate management of water and sanitation, with emphasis on priority health problems.
• Policies, plans, and models prepared for the prevention and management of emergencies and disasters in the drinking water and sanitation sector.
• Contribution made to the preparation of policies, plans, and projects to promote health throughout the life cycle, as well as healthy settings, within the sectoral reform processes.
• Plans and projects will have been contributed to the promotion and monitoring of food safety and nutrition, within the sectoral reform processes.
• Models, instruments, and standards designed to facilitate decentralized interventions aimed at controlling health risks, along with plans to control financial risks.
• Assistance provided by SESPAS in the design of a unit devoted to quality, standards, and indicators for evaluating and monitoring the quality of care.

### DECENTRALIZED MANAGEMENT FOR ACTION ON PRIORITY HEALTH PROBLEMS

**PURPOSE**

To develop the capacity for decentralized management and for implementation of the EPHF at the regional, provincial, and municipal levels.

**EXPECTED RESULTS**

- Regional and provincial models developed and activities carried out for decentralized, uniform application of national standards and procedures that increase efficiency and access to blood bank networks, public health laboratories, supplies, and special technological applications.
- A training program in the management of health services delivery networks and hospital management designed and implemented.
- Access to information on health topics facilitated for local personnel.
- Surveillance subsystems and the capacity to prevent and control health problems and epidemiological emergencies developed, for the consolidation of SINAVE.
- Information subsystems and the capacity for situation analysis to facilitate decision-making developed.
- Methods, models, and technologies to improve performance in priority programs for the prevention and control of health problems at the decentralized, adapted and developed.
- Cooperation provided for the development of plans and projects to strengthen institutions in the health and environment sectors, as well as community organizations, within the framework of the primary environmental care strategy.
- Plans and projects in place to develop the capacity of local institutions and the community to prevent and respond to emergencies and disasters.
- Local levels strengthened through the implementation of health promotion strategies.

### TECHNICAL COOPERATION AMONG COUNTRIES FOR THE DEVELOPMENT OF COOPERATIVE BORDERS

**PURPOSE**

To strengthen cooperation along the border and with other countries of the Region in priority health areas for the Dominican Republic.

**EXPECTED RESULTS**

- Projects developed in health sector reform that permit the sharing of experiences with respect to financing, the steering role, and sector organization (separation of functions, social security).
- A specific project for cooperation between Haiti and the Dominican Republic, particularly in border area, developed.
DEVELOPMENT OF INTERNAL MANAGEMENT IN THE BREAU FOR STRENGTHENING TECHNICAL COOPERATION

**Goal**
To implement the technical cooperation projects of the Representative Office in a coordinated manner, based on the cooperation priorities of the country, the SPO, and subregional and regional commitments.

**Expected Results**
- Cooperation projects implemented on the basis of national priorities, the SPO, and the administrative norms of the Organization.
- Technical-administrative capacity of the Representative Office for effective management of the technical cooperation program strengthened, and the use of human resources improved.
- Integrated development plan for the Representative Office kept up-to-date, based on the needs of the cooperation program, incorporating regulatory, organizational, and technical aspects.
- Infrastructure and organizational structure meets the needs of the technical cooperation program, based on the priorities of the Organization.

**Resources (US$)**

<table>
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<th>Percentage of estimated expenditure</th>
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<td>Family and community health</td>
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<td>-</td>
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</table>
EASTERN CARIBBEAN:
ANGUILLA, BRITISH VIRGIN ISLANDS (BVI), MONTSERRAT

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

> Health and quality of life of the population.
> Noncommunicable diseases (Anguilla, BVI).
> Health sector reform/Governance.
  Health authority/National health insurance/New role of the Ministry of Health (Anguilla).
  Research conditions/Steering role of the Ministry in policy formulation and planning/Health plan to include all facets of society in all areas (BVI).
> Infectious diseases.
  HIV/AIDS (Anguilla, BVI).
  TB (BVI).
  Vector-borne diseases (Anguilla).
> Adolescent health, including the negative impact of substance abuse and violence on youth.
> Environmental health (Anguilla); Healthy environments – homes, schools, workplaces (BVI).

PROJECTS

IMPROVED PERFORMANCE OF HEALTH SYSTEMS

PURPOSE
To improve the performance of health systems.

EXPECTED RESULTS
• Support provided to plans, policies, and projects to improve human resource management capacities (Anguilla and Montserrat).
• Role of the ministry of health strengthened in monitoring performance of the health system and enforcing public health laws.
• Plans, policies, and projects introduced to strengthen the capacity to apply health promotion strategies to priority problems.
• Plans, policies, and projects designed to strengthen capacities to monitor, evaluate, and analyze health status in BVI and EPI surveillance and information systems in Anguilla.
• Program implementation, monitoring and evaluation mechanisms in place.
### RESOURCES (US$)

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<td>Family and community health</td>
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</tbody>
</table>
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, INTERCONNECTIVITY, 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$)

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<tr>
<th>Percentage of estimated expenditure</th>
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<th>Other sources</th>
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<td>Universal access to health</td>
<td>15%</td>
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<td>15%</td>
</tr>
<tr>
<td>Disease control and risk management</td>
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<td>-</td>
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</tr>
<tr>
<td>Family and community health</td>
<td>1%</td>
<td>92%</td>
<td>1%</td>
</tr>
</tbody>
</table>
### 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>
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<tr>
<th>Percentage of estimated expenditure</th>
<th>Regular budget</th>
<th>Other sources</th>
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<td>Family and community health</td>
<td>11%</td>
<td>-</td>
<td>11%</td>
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| Total 2002-2003                      | 2,985,300     | 3,827,300    | 6,812,600 |
| Total 2004-2005                      | 3,082,800     | 20,000       | 3,102,800 |
FRENCH GUIANA: 
GUADELOUPE, (ST. MARTIN, ST. BARTHOLOMEW), 
AND MARTINIQUE

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- Cardiovascular diseases, traffic accidents, alcoholism, perinatal mortality, sickle cell anaemia, and neoplasms (Guadeloupe).
- HIV/AIDS, addictions, hypertension, diabetes, perinatal mortality, autism, and poverty (Martinique).
- Injuries, poisoning, diseases of the circulatory system, neoplasms, and infectious and parasitic diseases, including HIV/AIDS (French Guiana).

PROJECTS

DEVELOPMENT OF HEALTH SERVICES

PURPOSE
To strengthen the expansion of selected services in OECS countries.

EXPECTED RESULTS
- Technical cooperation with FDAs increased to support health sector reform in OECS countries.
- Support provided for technical cooperation between OECS countries and FDAs in managing natural disasters.
- Support provided for the participation of TCC between FDAs and the English Caribbean in the areas of tourism and water quality.
- Management of communicable diseases strengthened in the FDAs.
- Technical cooperation initiated for selected lifestyle and family health conditions.
- Technical cooperation between PAHO and FDAs expanded.

RESOURCES (US$)

<table>
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<tr>
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## GRENADA

### NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- Health sector reform, including human resource development.
- Oral health.
- Family health, including adolescent health.
- Environmental health.
- Health and ageing.
- Disaster management (prevention and mitigation).
- Mental health.
- Communicable diseases, including HIV/AIDS.
- Chronic non-communicable diseases.

## PROJECTS

### HEALTH SECTOR REFORM

**Purpose**
To strengthen institutional capacities for planning and managing policy development.

**Expected Results**
- Plans, projects, and policies introduced to strengthen the leadership role of the Ministry of Health and the Environment.
- Human resource management developed.
- Support provided to methods, models, and technologies to enhance evidenced-based decision-making.
- Models, methods, and mechanisms introduced for sustainable financing.
- Program implementation, monitoring, and evaluation mechanisms in place.

### FAMILY HEALTH

**Purpose**
To formulate and enhance selected national health programs.

**Expected Results**
- Methods, models, and technologies implemented to ensure adequate decision-making in selected areas related to family health.
- Methods, models, and technologies introduced to strengthen rehabilitative programs.
- Methods, models, and technologies developed and implemented to promote healthy lifestyles.
- Support provided to training programs for human resource development.
- Cooperative alliances strengthened in support of selected areas of family health.
ENVIRONMENTAL HEALTH/DISASTER

PURPOSE
To strengthen environmental health, surveillance, and disaster management programs.

EXPECTED RESULTS
- Standards and guidelines improved for the management of national environmental health and disaster management programs.
- Support provided to campaigns promoting the environmental health program.
- Direct support provided to strengthen human resource capacities for managing the environmental health and disaster management programs.
- Plans, projects, and policies enhanced to improve the environmental health program.

RESOURCES (US$)

<table>
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