

IV

COUNTRIES

ARGENTINA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

There are signs of gradual recovery from the economic crisis of recent years. In 17 of the 24 provinces in Argentina, the poverty rate is higher than the national average. In these provinces, some of the most serious problems are malnutrition, marginality, and inequity. Argentina became a non-permanent member of the United Nations Security Council for a two-year period. It is a member of the PAHO Executive Committee (2003-2006). The headquarters of the Pan American Institute for Food Protection and Zoonoses (INPPAZ) is located in Argentina. There is a national policy and strategy for territorial development and planning with objectives up to 2016. For the health sector, the "Foundations of the 2004-2007 Federal Health Plan" are under consideration, whose purpose is to reach a consensus on the priority health policies for strengthening health as an instrument of equity and development.

Important among the national health priorities are the following: support the steering role of national Ministry of Health and Environment and the provincial ministries; consolidate the primary health care (PHC) strategy as the foundation of the health care model; decrease fragmentation of the system and improve the use of resources. Access to drugs continues to be a high national priority. The cooperation strategy will be adapted to the Country Cooperation Strategy (CCS), which should be ready by July 2005.

The national priorities for PAHO/WHO technical cooperation are as follows:

- Decentralized technical cooperation with the provinces and municipios, while also supporting the steering role of the Argentine Ministry of Health and Environment.
- Cooperate in improvement of health conditions and the quality of life for the most neglected populations. Maternal and child health, nutrition, prevention and control of infectious diseases.
- Cooperate in the consolidation of a new health care model, supporting the "pathway of reforms" for access to health.
- Strengthen and consolidate actions that promote health and healthy public policies; combat smoking and other health risks.
- Maintain and reinforce the achievements of specific programs: immunization, drug availability and access, management of human resources in health, quality of care, and information systems in strategic areas for health management.
- Cooperate in the non-communicable disease prevention and control, active aging, mental health, alcohol consumption, and intentional and unintentional injuries.
- Develop a new model for managing scientific knowledge.
- Revitalize actions by women in health and development processes.
- Cooperate in forging partnerships for the national health development program with bilateral and multilateral participants from the international sphere.
- Cooperate with national efforts to achieve binational and subregional integration: MERCOSUR, South America, and the Andean Community.

PROJECTS

MANAGEMENT OF THE REPRESENTATIVE OFFICE

PURPOSE

To satisfactorily carry out administrative and maintenance operations in the Representative Office and effectively coordinate the programming, implementation, and evaluation of technical cooperation (TC) projects and activities, promoting the political and technical leadership of the Representative Office and cooperating with different national actors to further health development in the country.

EXPECTED RESULTS

- Unfinished Agenda in Provinces and Municipalities: Development of political relationships and advocacy to promote intersectoral and interagency coordination for national health development, with emphasis on provinces and municipalities with higher indices of health inequities, and on the most

vulnerable social groups among indigenous peoples, women, and border populations. The steering and leadership roles of the nation's Ministry of Health and Environment and the provincial ministries maintained and strengthened.

- Integration Mechanisms: The Representative Office's presence and technical cooperation will have continued to contribute effectively to the formulation, execution, and evaluation of plans, projects, and policies related to MERCOSUR or other regional or subregional integration initiatives, as well as to the development and strengthening of Argentina's bilateral and multilateral relations in health.
- Communication, Technology, and Training: A model for a Comprehensive Program for Strategic Communication (PRINCE) for the Representative Office designed, implemented, and evaluated.
- Technical Cooperation among Countries (TCC): TCC projects carried out to address health problems of common interest with other nations (mainly Paraguay, Bolivia, and Peru), with an emphasis on border areas but not limited to them. TCC through which Argentina can contribute to national health and regional development promoted through technology transfer and exchange.
- Management of Scientific Knowledge: A model for the Representative Office developed so that it can serve as an institution that generates and democratizes knowledge in health, in close coordination with the Regional Program.
- Representative Office Operations: Annual plans for the Representative Office prepared, implemented, and evaluated for each year of the biennium, taking into account the results of the 2005 Country Cooperation Strategy (CCS) and incorporating professional, technical, and service staff training as well as the development of institutional capacity to improve the Office's overall administrative, technical, and political operations.
- National Reference Institutions: Mobilization of national capacity related to the TC program with the country supported as part of a process to adopt new TC modalities, creating and strengthening strategic working partnerships with World Health Organization Collaborating Centers in Argentina and establishing networks of national institutions to address specific priority topics for PAHO/WHO's national TC program.
- Operating Costs: Direct support provided to ensure effective and efficient ongoing administrative operations in the Representative Office throughout the biennium in keeping with PAHO standards and procedures.
- Expanded Textbook and Instructional Materials Program (PALTEX): The country's Expanded Textbook and Instructional Materials Program functioning satisfactorily (maintaining at a minimum the sales volume of the 2004-2005 biennium), and the necessary direct technical and administrative support provided for adequate monitoring and supervision of the sales network.
- Women, Health, and Development: Cooperation provided in the organization and implementation of actions in advocacy and the building of partnerships to revitalize the topic of women, health, and development at the national and provincial levels, primarily from the perspective of public policies to reduce gender inequities in health, rights, and social justice.

COMMUNICABLE DISEASES

PURPOSE

To strengthen the institutional capacity of the provincial health ministries and the national Ministry of Health and Environment to draft and implement policies and programs for communicable disease prevention and control, with the participation of civil society and other societal actors with the potential to improve health conditions in the territories and among the most affected populations. Priority is to be given to the objectives of the Millennium Development Goals (MDGs).

EXPECTED RESULTS

- Prevention and Control of Communicable Diseases: Organization and operation of programs and projects for the prevention and control of communicable diseases, mainly Hantavirus, leishmaniasis, and dengue, with priority in the northwestern and northeastern provinces and other urban and periurban areas of the nation's principal cities.

- Epidemiological Alerts and Response: Warning systems strengthened through cooperation provided to the nation's Ministry of Health and Environment and other provincial entities; technical team set up and ready for rapid response to epidemiological alerts, and provincial teams set up for local alerts.
- Prevention and Control of HIV/AIDS: Technical assistance provided to strengthen national and provincial HIV/AIDS programs that target priority areas, and progress made toward the attainment of the MDGs, in close coordination with the different institutions that form part of the Country Coordination Mechanism of the Global Fund to Fight AIDS, Tuberculosis, and Malaria, and the UNAIDS Theme Group.
- Tuberculosis Prevention and Control: Technical assistance provided to provincial tuberculosis prevention and control programs, based on their principal needs.
- Prevention and Control of Chagas' Disease: Technical cooperation provided to help interrupt the vector-borne transmission of Chagas' disease.

NON-COMMUNICABLE DISEASES AND THE REDUCTION OF RISK FACTORS

PURPOSE

To support national and local efforts to develop and strengthen the capacity of national and provincial health authorities to prepare and implement policies, models, and plans to control chronic non-communicable diseases, improve nutrition, reorient mental health services, control the use of addictive and harmful substances, including tobacco, and organize and carry out information campaigns to combat violence and accidents, support people with disabilities, and integrate the gender approach into health programs.

EXPECTED RESULTS

- Surveillance and Prevention of Chronic Non-communicable Diseases: Efforts will have contributed to the sustainable integration of the module to monitor risk factors for non-communicable diseases into the permanent household survey of the National Statistics and Census Institute (INDEC), with an evidence-based orientation for intervention and control programs.
- Mental Health and the Prevention of Substance Abuse: Cooperation provided to implement a national mental health policy that reorients mental health and drug addiction prevention services.
- Smoking Prevention: Cooperation provided for efforts to control tobacco use, with the participation of civil society and the signing of the Framework Agreement.
- Food and Nutrition: Cooperation provided for analysis and monitoring of the nutritional status of the needier provinces and a direct contribution made to promoting food and nutrition plans, policies, and programs.
- Violence, Accidents, and Disabilities: Cooperation provided in the preparation and implementation of policies, plans, and programs to prevent violence and accidents and to expand care for the disabled, integrating the gender approach insofar as possible.
- Prevention and Control of Cervical Cancer: Cooperation provided to strengthen national and provincial capacity to prevent and control cervical cancer.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE

To support policies and strategies in environmental health, health promotion, and sustainable development consistent with the MDGs, and to strengthen national capacity to act in these areas, including preparedness and response to emergencies and disasters.

EXPECTED RESULTS

- National and Provincial Capacity: National and provincial capacity strengthened to develop policies, plans, and programs that identify, evaluate, improve, and/or control environmental conditions that are hazardous to human health.
- Governmental and Societal Action: Coordination between the government and civil society in implementing the primary environmental care strategy improved, with community participation in programs to improve and/or conserve physical environments that are safe for health.

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- Health Promotion: Cooperation provided for efforts to consolidate and expand processes and projects of the “Healthy Municipalities” initiative throughout the country and to formulate new initiatives that foster health promotion in ministerial and provincial programs within the framework of primary health care.

FAMILY AND COMMUNITY HEALTH

PURPOSE

As part of efforts to attain the MDGs, contribute to national and provincial development of family and community health, especially the immunization program and the introduction of new vaccines, reproductive health and safe pregnancy, and comprehensive health services for children and adolescents.

EXPECTED RESULTS

- Immunization and Vaccination: Capacity for immunization and the control of vaccine-preventable diseases maintained, with priority given to provinces and municipalities with coverage levels below the national average and activities to eliminate measles and rubella. Consideration given to eventually introducing new vaccines.
- Reproductive Health and Safe Pregnancy: Support provided for the design and implementation of policies, plans, and programs for reproductive health and safe pregnancy.
- Child and Adolescent Health: Technical assistance provided for the preparation and implementation of policies, plans, and projects for child health, and for the promotion of comprehensive health care for adolescents at the national and provincial levels.
- Active Aging: Cooperation provided in on the planning, design, implementation, and monitoring of integrated care for the elderly, promoting active aging and the implementation of actions directed toward elderly people who have lost their independence.

BAHAMAS

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The Mid-Term Report on the Commonwealth of The Bahamas National Health Services Strategic Plan (NHSSP) 2000-2004 and the Revised Commonwealth of The Bahamas NHSSP, 2003-2004 guide the technical cooperation program for 2006-07. The NHSSP period ended in December 2004, and the Ministry of Health (MOH) is in the planning stage for development of the next national strategic plan. The major priority areas are not expected to shift significantly in the next plan period, and this assumption has informed the development of the 2006-07 BPB. However, following completion of the next NHSSP, adjustments will be made as indicated.

The national priorities for technical cooperation with PAHO/WHO are:

- . Strengthening planning and strategic management processes, particularly the implementation of a National Health Insurance (NHI) System, strengthening human resource planning and the laboratory system, and support for the National Blood program;
- . Use of quality information to support decision-making processes, supporting implementation of the Public Health Information System;
- . Development and strengthening of specific interventions to improve the health of the population in areas that account for important levels of morbidity and mortality, including HIV/AIDS, non-communicable diseases, family violence, and child abuse.

PROJECTS

HEALTH SYSTEMS STRENGTHENING

PURPOSE

To strengthen the capacity for strategic planning and management of the public health care system.

EXPECTED RESULTS

- . MOH and National Insurance Board (NIB) capacity for NHI project plan implementation strengthened.
- . MOH capacity for health systems strategic management strengthened.
- . Public Hospitals Authority (PHA) capacity for strategic management strengthened.
- . Support services strengthened to ensure quality health care.
- . National capacity for TCC development and implementation strengthened.
- . Department of public health capacity for strategic management strengthened.
- . National capacity for disaster preparedness strengthened.

EVIDENCE-BASED DECISION MAKING

PURPOSE

To strengthen the public health sector capacity for strategic management of the national health information network and for the implementation and maintenance of information systems in the various departments, institutions, and programs.

EXPECTED RESULTS

- . Capacity of the MOH 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.
- . Hospital-based information systems strengthened.

POPULATION HEALTH

PURPOSE To strengthen public health system capacity for development and implementation of programs and services to address priority health needs of the population.

EXPECTED RESULTS

- . Capacity of the National HIV/AIDS Program for decentralization of services strengthened.
- . Child and adolescent health programs and services strengthened.
- . Programs for the prevention, early detection, and management of family violence (including child abuse) strengthened.
- . Capacity of the chronic, non-communicable disease (CNCD) program for strategic management strengthened.

MANAGEMENT OF THE REPRESENTATION

PURPOSE To support the PAHO/WHO Representation's capacity for effective management and implementation of the technical cooperation program.

EXPECTED RESULTS

- . Support personnel compensated.
- . Country office and staff developed to support technical cooperation programs in accordance with the Office Development Plan.
- . Provision made for general management and operations of the country office.
- . Information technology of the country office maintained and upgraded.
- . Information about health and development in the global health sector disseminated to relevant audiences.
- . Transportation provided to support the activities of the Representation.
- . Provision made for PWR and Administrator participation in regional and subregional meetings.

BARBADOS AND THE MEMBER STATES OF THE ORGANISATION OF EASTERN CARIBBEAN STATES.

In recognition of the similarities among Barbados and the OECS countries, PAHO/WHO used a participatory process involving national counterparts and development partners to formulate an Eastern Caribbean Cooperation Strategy (ECCS) 2005-2009, to guide its technical cooperation in, and with, the countries. The ECCS, modeled off the Country Cooperation Strategy (CCS), is the first multi-country cooperation strategy developed by PAHO/WHO to address common priority health issues in the countries. The ECCS priorities are congruent with the national priorities (as identified and published in Investing In Health For The Future Development Of Anguilla: A Strategic Plan For Health 2003-2008; Barbados Strategic Plan for Health 2002-2012; Commonwealth of Dominica Draft National Health Sector Plan 2001-2005;) and in other national frameworks for action in health, and with wider Caribbean subregional health priorities. The ECCS will be made operational through the biennial program budget starting in 2006-07.

The OECS priorities for technical cooperation with PAHO/WHO are:

- Enabling health systems to provide appropriate, efficient, and effective interventions to ensure equitable access and improve quality of services:
 - Health financing mechanisms
 - Public health legislation, regulation, and registration
 - Essential public health functions, including human resource development, planning, and management; public health research; quality assurance and systems performance management; and development and management of information systems
- Strengthening public health leadership towards promotion of wellbeing and reduction of health inequities:
 - Identification/strengthening of public health leadership
 - Promotion of health and well being
 - Information, communication, and advocacy for health
 - Inclusion of vulnerable groups
- Reducing preventable mortality, avoidable morbidity, and disability in priority health areas:
 - Non-communicable diseases – diabetes, cardiovascular diseases, and cancer
 - Mental disorders and rehabilitation
 - Communicable diseases – HIV/AIDS/STIs, dengue, food and water borne diseases, and vaccine preventable diseases
 - Unintentional and intentional injuries – road traffic injuries, violence, suicides and homicides
 - Family health – nutritional disorders, including obesity and deficiencies, child health, youth health, health and ageing
- Reducing risk factors to human health arising from environmental and economic causes, including natural and other hazards:
 - Disaster management
 - Environmental sustainability
- Enabling optimal use of global, regional, and subregional initiatives for national health development
 - Stakeholder consultations/mobilization of non-health partners
 - Updated health situation analyses and intelligence
 - Monitoring and analysis of international development agreements,
 - Updating and monitoring of national health plans
 - Development of national mechanisms to coordinate and negotiate international cooperation and resources for health

FRENCH DEPARTMENTS IN THE AMERICAS

The priorities for technical cooperation with PAHO/WHO identified by French Guiana, Guadeloupe, and Martinique i.e. the French Departments in the Americas (FDAs) are:

- Strengthening programs for vaccine preventable diseases in French Guiana;
- Harmonizing HIV/AIDS prevention and control activities between the FDAs and the English-speaking Caribbean;
- Strengthening programs to control dengue in all the FDAs, and malaria in French Guiana;
- Supporting the rationalization of the health care referral system between the English and Latin Caribbean and the FDAs;
- Reshaping the health promotion programs in the FDAs to address prevention and control of non-communicable diseases and substance abuse;
- Sharing expertise and expanding the collaboration (TCC) in pesticide research and control in Guadeloupe and Martinique to the Eastern Caribbean; and
- Increasing economic growth among vulnerable populations, in collaboration with the English-speaking Caribbean.

ANGUILLA, THE BRITISH VIRGIN ISLANDS, AND MONTSERRAT

COUNTRY SUPPORT

PURPOSE To support more effective high quality of technical cooperation with Anguilla, the British Virgin Islands and Montserrat (based on ECCS).

EXPECTED RESULTS

- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
- Projects for TC and resource mobilization developed/implemented effectively (including TCC).
- Advocacy for health in development conducted with development partners.
- Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

PURPOSE To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.

EXPECTED RESULTS

- Capacity of in-country health information systems to produce and health information for use in decision-making and program management improved.
- Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
- Capacity of health systems for the efficient and effective delivery of health services strengthened.
- Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

PURPOSE To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.

EXPECTED RESULTS

- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
- Policy and planning for NCD, prevention and control strengthened.
- Support provided to countries to strengthen their capacity to implement mental health policies and plans.
- Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
- Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

PURPOSE To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.

**EXPECTED
RESULTS**

- Expanded HIV/AIDS response with integration in MCH services facilitated.
- Impact mitigation supported for HIV/AIDS
- Expanded response in HIV/AIDS care and treatment supported.
- Evaluation and research for management of vector control program supported.
- Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE

To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

**EXPECTED
RESULTS**

- Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
- Training conducted to facilitate sustainable evidence and gender-based programs.
- Support provided for operational strengthening of special programs (eye services and services for the elderly).
- Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE

To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

**EXPECTED
RESULTS**

- Strategies to reduce health risks from exposure to harmful environment supported.
- Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
- Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE

To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

**EXPECTED
RESULTS**

- Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.

ANTIGUA AND BARBUDA

COUNTRY SUPPORT

- PURPOSE** To support more effective high quality technical cooperation with Antigua & Barbuda (based on ECCS).
- EXPECTED RESULTS**
- Technical and administrative processes and resources used effectively to support the design, implementation; and coordination of TC program to match country needs.
 - Projects for TC and resource mobilization developed/implemented effectively (including TCC).
 - Advocacy for health in development conducted with development partners.
 - Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
 - Capacity of health systems for the efficient and effective delivery of health services strengthened.
 - Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

- PURPOSE** To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.
- EXPECTED RESULTS**
- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
 - Policy and planning for NCD, prevention and control strengthened.
 - Support provided to countries to strengthen their capacity to implement mental health policies and plans.
 - Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
 - Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.

- RESULTS**
- . Impact mitigation supported for HIV/AIDS.
 - . Expanded response in HIV/AIDS of care and treatment supported.
 - . Evaluation and advocacy for management of vector control program supported.
 - . Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Support provided for operational strengthening of special programs (eye services and services for the elderly).
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies to reduce health risks from exposure to harmful environment supported.
 - . Science-based surveillance tools developed for risk assessment and management.
 - . Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - . Cadre of national professionals enabled to implement Healthy Schools, Community, and Municipalities strategies.

BARBADOS

COUNTRY SUPPORT

- PURPOSE** To support the management of the country program.
- EXPECTED RESULTS**
- Support provided to the PAHO/WHO Technical Cooperation program in Barbados.
 - Plans and projects developed and implemented to manage the Representative Office for efficient implementation of the TC program as defined jointly with national health and development partners and other stakeholders.
 - Capacity enhanced for development and implementation of proposals for resource mobilization including the use of Technical Cooperation among Countries.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
 - Strengthening the capacity of health systems for the efficient and effective delivery of health services.
 - Capacity to formulate appropriate financing mechanisms for universal access to health.
 - Support provided for the implementation and monitoring of plans, policies and projects to strengthen the strategic management of human resources.

NON-COMMUNICABLE DISEASES AND INJURIES

- PURPOSE** To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.
- EXPECTED RESULTS**
- Integrated community based NCD prevention program developed, implemented and evaluated within the framework of the CARLI/CARMEN initiative.
 - Policy and planning for NCD, prevention and control strengthened.
 - Support provided to countries to strengthen their capacity to implement mental health policies and plans.
 - Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.
 - Impact mitigation supported for HIV/AIDS.

- . Expanded response in the area of care and treatment supported.
- . Evaluation and research for management of vector control program supported.
- . Support provided for the implementation of the International Health Regulations.
- . Advocacy strategies to prioritize programs against disease vectors and increase in resources available for control supported.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Support provided for operational strengthening of special programs (eye services and services for the elderly)
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - . Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies to reduce health risks from exposure to harmful environment supported.
 - . Science based surveillance tools developed for risk assessment and management.
 - . Food borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Strengthening public health leadership capacities in the promotion of well being and reduction of health inequities.
 - . Cadre of national professionals enabled to implement healthy schools, community, and municipality strategies.
 - . Mechanisms and models to promote media/communications interventions and knowledge- sharing supported.

DOMINICA

COUNTRY SUPPORT

PURPOSE To support more effective high-quality of technical cooperation with the Commonwealth of Dominica (based on ECCS).

EXPECTED RESULTS

- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
- Projects for TC and resource mobilization developed/implemented effectively (including TCC).
- Advocacy for health in development conducted with development partners.
- Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

PURPOSE To strengthen the institutional capacity of the Ministries of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.

EXPECTED RESULTS

- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
- Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
- Capacity of health systems for the efficient and effective delivery of health services strengthened.
- Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

PURPOSE To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.

EXPECTED RESULTS

- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
- Policy and planning for NCD, prevention and control strengthened.
- Support provided to countries to strengthen their capacity to implement mental health policies and plans.
- Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
- Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

PURPOSE To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.

- EXPECTED RESULTS**
- . Expanded HIV/AIDS response with integration in MCH services facilitated.
 - . Impact mitigation supported for HIV/AIDS.
 - . Expanded response in the area of HIV/AIDS care and treatment supported.
 - . Evaluation and research for management of vector control program supported.
 - . Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Support provided for operational strengthening of special programs (eye services and services for the elderly)
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - . Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies to reduce health risks from exposure to harmful environment supported.
 - . Science-based surveillance tools developed for risk assessment and management.
 - . Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - . Cadre of national professionals enabled to implement Healthy Schools, Communities, and Municipalities strategies.

FRENCH GUIANA

COUNTRY SUPPORT

- PURPOSE** To support more effective high quality technical cooperation with countries.
- EXPECTED RESULTS**
- Country cooperation and coordination alliances and partnerships strengthened to expand technical cooperation between PAHO and FDAs.
 - Resources for implementation of technical and administrative processes and resources efficiently managed and effectively supported.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministries of Health and the health care systems to produce more equitable, effective, efficient and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
 - Strengthening the capacity of health systems for the efficient and effective delivery of health services.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.
 - Evaluation and research for management of vector control program supported.
 - Support provided for the implementation of the International Health Regulations.
 - Advocacy strategies to prioritize programs against disease vectors and increase in resources available for control promoted.

FAMILY AND COMMUNITY HEALTH

- PURPOSE** To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.
- EXPECTED RESULTS**
- Methods, models and technologies to enhance the use of reproductive health services planned and implementation supported.
 - Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.

SUSTAINABLE DEVELOPMENT AND HEALTH

- PURPOSE** To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

**EXPECTED
RESULTS**

- Strategies to reduce health risks from exposure to harmful environment supported.
- Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE

To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

**EXPECTED
RESULTS**

- Strengthening public health leadership capacities in the promotion of well being and reduction of health inequities.
- Cadre of national professionals enabled to implement healthy schools, community, and municipality strategies.

GRENADA

COUNTRY SUPPORT

- PURPOSE** To support more effective high quality of technical cooperation with Grenada (based on ECCS).
- EXPECTED RESULTS**
- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
 - Projects for TC and resource mobilization developed/implemented effectively (including TCC).
 - Advocacy for health in development conducted with development partners.
 - Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of national health information systems to monitor, analyze and produce information on the health of the population strengthened.
 - Capacity of health systems for the efficient and effective delivery of health services strengthened.
 - Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

- PURPOSE** To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.
- EXPECTED RESULTS**
- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
 - Policy and planning for NCD, prevention and control strengthened.
 - Support provided to countries to strengthen their capacity to implement mental health policies and plans.
 - Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
 - Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.

- RESULTS**
- . Expanded response in the HIV/AIDS care and treatment supported.
 - . Evaluation and advocacy for management of vector control program supported.
 - . Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - . Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies implemented to reduce health risks from exposure to harmful environment.
 - . Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - . Cadre of national professionals enabled to implement Healthy Schools, Communities, and Municipalities strategies.

SAINT KITTS AND NEVIS

COUNTRY SUPPORT

- PURPOSE** To support more effective high quality technical cooperation with St Kitts and Nevis (based on ECCS).
- EXPECTED RESULTS**
- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
 - Projects for TC and resource mobilization developed/implemented effectively (including TCC).
 - Advocacy for health in development conducted with development partners.
 - Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of health systems for the efficient and effective delivery of health services strengthened.
 - Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

- PURPOSE** To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.
- EXPECTED RESULTS**
- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
 - Policy and planning for NCD, prevention and control strengthened.
 - Support provided to countries to strengthen their capacity to implement mental health policies and plans.
 - Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
 - Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.
 - Impact mitigation supported for HIV/AIDS.

- Expanded response in HIV/AIDS care and treatment supported.
- Evaluation and research for management of vector control program supported.
- Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - Training conducted to facilitate sustainable evidence and gender-based programs.
 - Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- Strategies to reduce health risks from exposure to harmful environment supported.
 - Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - Cadre of national professionals enabled to implement Healthy Schools, Communities, and municipalities strategies.

SAINT LUCIA

COUNTRY SUPPORT

- PURPOSE** To support more effective high quality of technical cooperation with Saint Lucia (based on ECCS).
- EXPECTED RESULTS**
- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
 - Projects for TC and resource mobilization developed/implemented effectively (including TCC).
 - Advocacy for health in development conducted with development partners.
 - Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

- PURPOSE** To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.
- EXPECTED RESULTS**
- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
 - Capacity of health systems for the efficient and effective delivery of health services strengthened.
 - Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

- PURPOSE** To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.
- EXPECTED RESULTS**
- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
 - Policy and planning for NCD, prevention and control strengthened.
 - Support provided to countries to strengthen their capacity to implement mental health policies and plans.
 - Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
 - Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

- PURPOSE** To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.
- EXPECTED RESULTS**
- Expanded HIV/AIDS response with integration in MCH services facilitated.
 - Impact mitigation supported for HIV/AIDS.

- . Expanded response in HIV/AIDS care and treatment supported.
- . Evaluation and research for management of vector control program supported.
- . Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Support provided for operational strengthening of special programs (eye services and services for the elderly).
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - . Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies to reduce health risks from exposure to harmful environment supported.
 - . Science-based surveillance tools developed for risk assessment and management.
 - . Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - . Cadre of national professionals enabled to implement Healthy Schools, Communities, and municipalities strategies.

SAINT VINCENT AND THE GRENADINES

COUNTRY SUPPORT

PURPOSE To support more effective high quality technical cooperation with St Vincent & the Grenadines (based on ECCS).

EXPECTED RESULTS

- Technical and administrative processes and resources used effectively to support the design, implementation, and coordination of TC program to match country needs.
- Projects for TC and resource mobilization developed/implemented effectively (including TCC).
- Advocacy for health in development conducted with development partners.
- Sub-regional cooperation and international (sub-regional and regional) health integration processes supported.

HEALTH SYSTEMS DEVELOPMENT

PURPOSE To strengthen the institutional capacity of the Ministry of Health and the health care systems to produce more equitable, effective, efficient, and financially sustainable services.

EXPECTED RESULTS

- Capacity of in-country health information systems to produce and analyze health information for use in decision-making and program management improved.
- Capacity of health systems for the efficient and effective delivery of health services strengthened.
- Support provided for the implementation and monitoring of plans, policies, and projects to strengthen strategic human resource management.

NON-COMMUNICABLE DISEASES AND INJURIES

PURPOSE To strengthened formulation and implementation processes of NCD policies, plans, and programs strengthened.

EXPECTED RESULTS

- Integrated community-based NCD prevention program developed, implemented, and evaluated within the framework of the CARLI/CARMEN initiative.
- Policy and planning for NCD, prevention and control strengthened.
- Support provided to countries to strengthen their capacity to implement mental health policies and plans.
- Support provided for asthma research and the development and implementation of the sub-regional Caribbean Asthma Management guidelines.
- Capacity to design and implement evidence-based plans and programs for violence and injury prevention, control and monitoring.

COMMUNICABLE DISEASE

PURPOSE To strengthened technical capacity to implement strategies that protect against communicable diseases strengthened.

EXPECTED RESULTS

- Expanded HIV/AIDS response with integration in MCH services facilitated.

- RESULTS**
- . Impact mitigation supported for HIV/AIDS.
 - . Expanded response in HIV/AIDS care and treatment supported.
 - . Evaluation and research for management of vector control program supported.
 - . Support provided for the implementation of the International Health Regulations.

FAMILY AND COMMUNITY HEALTH

PURPOSE To improve access to quality healthcare services introduce evidence-based interventions and maintain progress in preventable diseases.

- EXPECTED RESULTS**
- . Methods, models, and technologies to enhance the use of reproductive health services planned and implementation supported.
 - . Training conducted to facilitate sustainable evidence and gender-based programs.
 - . Support provided for operational strengthening of special programs (eye services and services for the elderly).
 - . Standards and guidelines to improve the delivery of quality oral health and child-care formulated and implementation supported.
 - . Plans, projects and policies to increase the capacity to provide quality youth services developed.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE To strengthen management of environmental health dimensions of public health and sustainable development strengthened.

- EXPECTED RESULTS**
- . Strategies to reduce health risks from exposure to harmful environment supported.
 - . Food-borne disease surveillance and food hazards monitoring and response programs strengthened.
 - . Adequate support provided to improve the level of disaster preparedness and mitigation at national level.

PUBLIC HEALTH LEADERSHIP FOR WELLBEING

PURPOSE To strengthen national capacity to improve health through multisectoral and multidisciplinary action strengthened.

- EXPECTED RESULTS**
- . Public health leadership capacities in the promotion of well being and reduction of health inequities strengthened.
 - . Cadre of national professionals enabled to implement Healthy Schools, Communities, and municipalities strategies.

BELIZE

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Belize is a small, young, multi-ethnic nation with an open economy and relatively less poverty and inequality than the majority of countries in the Region. It has been faced with problems of governance, which have been exacerbated by changes in its population caused by a heavy influx of migrants; this has made it a far more multi-ethnic and multilingual country. The demands generated by these strong population currents have put a serious strain on the health and education sectors. The country's location and geography make it highly vulnerable to natural disasters (hurricanes, tropical storms, and floods). Belize has been in the process of epidemiological transition since the early 1990s, with a decline in communicable diseases and a rise in noncommunicable diseases and problems associated with human behavior and lifestyles.

National priorities for technical cooperation with PAHO/WHO are:

- Strengthening the capacity of the Ministry of Health to carry out Essential Public Health Functions;
- Strengthening the capacity of the Ministry of Health to reduce maternal mortality and morbidity by addressing quality of care issues, to establish safe and supportive environments, and to provide appropriate care for children and adolescents through extension of the Integrated Management of Childhood Illness (IMCI) and Integrated Care of Adolescents strategies;
- Development of plans, policies, and norms for priority diseases, including strengthening surveillance systems for non-communicable disease risk factors, communicable diseases, giving priority to HIV/AIDS and issues related that family violence, and child abuse;
- Strengthening national health information systems, including vital statistics;
- Strengthening disaster mitigation programs, including those pertaining to water and sanitation.

PROJECTS

COUNTRY PROGRAM SUPPORT

PURPOSE

To provide efficient and effective support to the implementation of the technical cooperation in the country.

EXPECTED RESULTS

- Administrative personnel compensated appropriately.
- Personnel management strengthened.
- General Operation Management strengthened.
- Communication/information systems in the office improved.
- Processes supported for the development and implementation of technical programs.
- Technician Cooperation Country project developed and implemented.

HEALTH SYSTEM AND SERVICES

PURPOSE

To contribute to improving the efficiency and effectiveness of health systems and services in Belize.

EXPECTED RESULTS

- Stewardship role of the Ministry of Health strengthened.
- Implementation of the national human resources development plan in health supported.
- Institutional capacity strengthening in the areas of laboratory and blood transfusion services and health information systems.
- Disaster management and risk reduction programs supported.

FAMILY HEALTH

- PURPOSE** To support national efforts toward the achievements of the MDGs with special emphasis on safe motherhood and child health.
- EXPECTED RESULTS**
- Initiatives on safe motherhood and child health services supported.
 - Implementation of the National Plan of Action for Food and Nutrition Security supported.
 - Surveillance and intersectoral coordination in the management of family violence strengthened.

ENVIRONMENTAL PROTECTION AND DEVELOPMENT

- PURPOSE** To contribute to the development and maintenance of safe and healthy environments.
- EXPECTED RESULTS**
- Adequate solid waste management promoted and supported.
 - National food safety program and water quality surveillance strengthened.
 - Development and implementation of integrated vector control strategies supported.
 - Institutional capacity strengthened to address occupational safety and health.

DISEASE PREVENTION AND CONTROL

- PURPOSE** To support national programs for the reduction of risk in relation to Non Communicable Diseases (NCDs) and Communicable Diseases (CDs).
- EXPECTED RESULTS**
- Behavioral change and healthy lifestyle initiative promoted and supported.
 - National capacity in the management and prevention of HIV/AIDS/STIs and TB strengthened.
 - Programs for the prevention and control of priority NCDs and lifestyle-related problems supported.
 - National Mental Health Program strengthened.

BOLIVIA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Bolivia is considered to be one of the four priority countries for PAHO/WHO cooperation. The unfinished agenda is perpetuated by poverty and inequity. More than half the Bolivian population is poor, residing primarily in rural areas, where they are deprived of access to opportunities and skills. Critical areas that affect the health system include: ineffective leadership, fragmentation of the system, limited managerial capacity, poor human resources management and development, segmentation of the system, and lack of an effective intercultural approach. Bolivia is a member of the WHO Executive Board (2004-2007). The first session on the CCS was held in August 2003.

The national priorities for PAHO/WHO technical cooperation are as follows:

- Cooperate in implementation of national programs on: sexual and reproductive health, birth control, and the prevention and control of cervical cancer.
- Strengthen the national health system by promoting the implementation and use of technologies that improve and increase access to scientific knowledge, information, and communication.
- Strengthen national capacity to formulate policies and the steering role of the national, departmental, and local health authorities through social participation and an intercultural approach under the country's new legal framework.
- Strengthen the institutions that deal with environmental health, disasters, and occupational health, and foster community participation strategies to improve health, local development, equity, and social justice.
- Cooperate in the development of health policies and strengthen the institutional capacity of the national health system to prevent, control, and reduce communicable and non-communicable diseases.
- Cooperate in the implementation of the National Health Promotion Program, geared to family and community health, children, youth, and the elderly.

PROJECTS

HEALTH OF WOMEN AND CHILDREN. MILLENNIUM DEVELOPMENT GOALS 4 AND 5 AND PRIORITY PUBLIC HEALTH PROBLEMS: NUTRITIONAL DEFICIENCIES AND CERVICAL CANCER.

PURPOSE

To help meet the health-related Millennium Development Goals for women and children, within the framework of the country's national development strategy, mainly its human security component; in addition, to help solve other important problems affecting the population's health such as nutritional deficiencies and cervical cancer.

EXPECTED RESULTS

- Support implementation of national reproductive health program (2004-2008): REPRODUCTIVE HEALTH will support execution of the National Program for Sexual and Reproductive Health 2004-2008. Support will be provided to implement the National Contraception Plan (WHA 57.11) and the National Plan to Prevent and Control Cervical Cancer.
- Support implementation of national reproductive health program (2004-2008): REPRODUCTIVE HEALTH will support execution of the National Program for Sexual and Reproductive Health 2004-2008. Support will be provided to implement the National Contraception Plan (WHA 57.11) and the National Plan to Prevent and Control Cervical Cancer.

- Support for implementation of the National Plan for Safe Motherhood and Births: SAFE MOTHERHOOD. Support will be provided for updating and disseminating standard maternal and neonatal health care protocols.
- Prenatal care. Essential obstetric and neonatal care and skilled care in delivery: SAFE MOTHERHOOD. Support will be provided for cooperation with departments and local health directorates (DILOS) and for training on CONE, prenatal and postpartum care, and newborn care, in keeping with the standards of maternal and perinatal health programs.
- Systems for monitoring, surveillance, and evaluation of maternal and perinatal health programs: SAFE MOTHERHOOD. Will cooperate with the systems for monitoring, surveillance, and evaluation of maternal and perinatal health programs.
- Greater participation by individuals, families, and communities in maternal and perinatal care: SAFE MOTHERHOOD. Heightened public awareness of essential obstetric and neonatal care through social networks and the empowerment of individuals, families and communities (IFC) to promote timely demand for neonatal and maternal care services.
- Support for the administration of the project: ADMINISTRATION OF THE PROJECT. Implementation of Cooperation Project on Women's and Children's Health with professional and administrative resources, as well as general support services.
- Monitoring and technical support for the food and nutrition policy, with emphasis on food fortification: NUTRITION. Support provided for the Implementation of food and nutrition policy, as well as the plans, programs, and projects developed at national, departmental, and municipal levels.
- Integrated Management of Childhood Illness Strategy (IMCI): CHILD HEALTH: The IMCI strategy will be expanded and consolidated at the national level for children under 5 as part of the basic efforts to reduce infant mortality and take steps toward meeting respective Millennium Goal and Target.
- Comprehensive adolescent health program: ADOLESCENT HEALTH. Will support comprehensive adolescent health program throughout the biennium, with cross-sectoral actions and community participation.

MANAGEMENT OF SCIENTIFIC KNOWLEDGE AND COMMUNICATION IN HEALTH

PURPOSE

Strengthen national health system by improving and increasing access to scientific knowledge, information, and communication in health, promoting the adoption and use of technologies.

EXPECTED RESULTS

- Information in public health and knowledge management: Public information and knowledge management. Support will be provided for assisting the national health system and health institutions in disseminating public health information and increasing access to scientific and technical knowledge.
- Information and communication technologies: Knowledge management and information technologies. Support will be provided for developing strategies and plans for the design and implementation of information and communication technologies within the context of Country Focus Initiative.
- Information sources: Knowledge management and information technologies. Support will be offered to strengthen and position PAHO//WHO as the public health agency that disseminates and democratizes knowledge within the context of the Country Focus Initiative.

MANAGEMENT AND COORDINATION OF COUNTRY PROGRAM

PURPOSE	Management and coordination of country program. Will have contributed to effective administration and management of the PAHO/WHO Representative Office in Bolivia.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Rent and maintenance: Rent and maintenance. Rent and maintenance of the PAHO/WHO Representative Office in Bolivia guaranteed, as well as general services and basic expenditures for the building shared with other international organizations. • Expenditures for public utilities, electric power, and water: Expenditures for public utilities, electric power, and water guaranteed. • Rent and maintenance of furniture, office equipment, and vehicles, purchase of fuel, vehicle maintenance, and parking: Rent and maintenance of furniture, office equipment, vehicles, purchase of fuel, vehicle maintenance and parking duly provided. • Expenses for communications, domestic and international correspondence, copying services: Will have adequately covered the expenditures for communications, Internet service, national and international mail, and copying services. • Operational and miscellaneous costs, vehicle insurance, office and other supplies provided. • Operational and miscellaneous costs, vehicle insurance, office and other supplies provided. • New acquisitions of equipment and other assets: Pursuant to the Representative Office's development plan, new equipment and other assets will have been obtained. • Contracts for National Staff: Contracts for national staff for the operation of the Representative Office will have been guaranteed.

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE	National health development: This project includes activities aimed at having the highest capacity and professional and technical competencies to meet the TCD needs of the country. This also includes support for TCD in priority departments of the country.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Expected Results • Execute the development plan of the PAHO//WHO Representative Office in Bolivia: Execute the development plan of the Representative Office, with special emphasis on improving the technical skills of PAHO//WHO personnel in the Bolivia Representative Office to meet national technical cooperation needs. • Information technology services of the Representative Office: Information technology services of the Representative Office. • Resource mobilization: Support for the activities of the Representative and Administrator in managing resource mobilization for the implementation of technical cooperation projects implies the payment of hospitality, travel, and meeting expenses. • Support for development for the Representative Office: National/international trips of the PWR and administrator support for technical cooperation activities in priority departments, municipalities, and communities.

DEVELOPMENT OF HEALTH POLICIES, SYSTEMS, AND SERVICES
PURPOSE

National, departmental and local health authorities strengthened by developing their steering role in the organization, financing, and execution of health policies, systems and services, with community participation and an intercultural approach, within the country's new legal framework.

EXPECTED RESULTS

- Health policies, legislation and steering role: Health Policies - Legislation
- Strengthened national capacity to formulate policies and enforce legislation and regulations to protect and promote public health through technical cooperation and information exchange.
- Public health management –Reduction of inequity and enforcement of health rights.
- Management of health policies –Reduction of inequity and enforcement of health rights: Support will have been provided for developing the management capacity of the health authority, which will make possible the implementation of policies, plans, and programs that will increase the health impact derived from reducing inequities in health and promoting the human rights approach.
- Organization and Health Services Administration - Access and Quality within the framework of PHC: Organization and Health Services Administration - Access
- Support provided for the development of strategies, instruments, and methodologies to improve access and the quality of essential health services in priority rural and marginal peri-urban areas within the framework of strengthening PHC.
- Organization and administration of health services - Indigenous Peoples: Organization and administration of health services - Indigenous Peoples.
- Support will be provided for consolidation of the Health of the Indigenous Peoples Initiative and building technical capacity at the national and local levels to identify and reduce health inequities, with special attention to access to appropriate health services.
- Human resources: Support provided for the formulation and implementation of national policies for human resource development in health.
- Health Financing and Social Protection: Health financing and social protection. Social exclusion in health will have been monitored and evaluated, and information/knowledge about this issue is available; furthermore, opportunities for dialogue and consensus-building created and strengthened to generate coordinated intra- and interinstitutional policies, strategies, and actions that result in social protection and health financing.
- Social Protection and Financing: Health financing and social protection: Health officials will receive support in preparing and implementing proposals to organize and extend benefits from social security organizations.
- Health financing and Social Protection: Health financing and Social Protection. Support will have been provided to the country in preparing policy options, directives, and recommendations for health financing and social protection.
- Essential drugs: Essential drugs: Strengthened national institutional capacity in the application, supervision, and evaluation of national essential drug policies, based on the control and monitoring of drugs, the impact of trade agreements on access to drugs, and the strengthening of capacity in the pharmaceutical sector.
- Sanitary technologies: Sanitary technologies. Technical capacity of national regulatory authority strengthened to implement a program for technology management, sanitary regulation of equipment, medical devices, and programs for the development of diagnostic imaging and radiation therapy services.
- Information systems, situation analysis, and knowledge management in epidemiology and public health: development and strengthening of capacity for analysis and management of public health

information systems, development of epidemiological surveillance and public health monitoring, based on effective information/knowledge management strategies.

- Public health research: Development of sanitary research systems, increased research capacity and use of research findings to strengthen national health system.
- Administrative Processes: Administrative Processes.
- Decentralized health management at SEDES and in municipios and consolidation of PAHO's CTD: Support provided for decentralization by strengthening municipal and departmental health management and PAHO decentralized technical cooperation in the departments of Santa Cruz, Cochabamba, and Beni.

ENVIRONMENTAL HEALTH AND DISASTERS

PURPOSE

Institutions in the areas of environmental health, disasters, and occupational health strengthened, along with community-participation strategies to improve health, local development, equity, and social justice.

EXPECTED RESULTS

- Monitoring environmental health risks: Contributions will have been made to implementation by the health authorities of a technical tool to monitor and control environmental health risks.
- Environmental health actions: Cooperation with the health sector to implement environmental health activities, giving priority to municipalities and population groups with higher risk and exclusion levels.
- Strategic partnerships: Cooperation in the establishment, development, and strengthening of strategic alliances in environmental health, with national and international institutions and/or actors, to address the main problems identified in the country.
- Emergency Preparedness and Disaster Relief: A contribution will have been made to developing and strengthening national capacity to cope with emergencies and disasters from a health perspective.
- Project administrative procedures: Administrative procedures have been followed that facilitate the technical cooperation of the project.

PREVENTION, CONTROL, AND REDUCTION OF COMMUNICABLE AND NON-COMMUNICABLE DISEASES

PURPOSE Disease Prevention and Control: To help reduce the incidence of malaria and other serious diseases (MDG: 8): Cooperate technically in developing health policies and strengthening the institutional capacity of national health system to prevent, control, and reduce communicable and non-communicable diseases.

EXPECTED RESULTS

- Reduce the incidence of malaria and other serious diseases (MDG-Goal 8): Combat HIV-AIDS and other diseases: Help reduce the incidence of malaria and serious diseases such as tuberculosis and Chagas' disease within the framework of MDG-Goal 8 and WHO work areas 1, 3, 4, 5 and 6.
- Food safety: There will have been cooperation with the integrated food safety system.
- Promote gender equality in health: Gender equity, health, and women. Implementation of the national plan for gender and health will be supported through the development of instruments for health management with social participation within the framework of the Millennium Development Goals.
- Expanded Program on Immunization: Expanded Immunization Program (EIP). Maintain polio eradication, absence of indigenous measles cases and reduction of other diseases as EPI objectives, through greater-than-95% coverage and a surveillance system that permits timely detection and investigation of cases, improving performance in the 2004-2005 biennium.
- Master's, doctorate, and SENASAG plans and programs strengthened for the control of zoonoses (rabies, brucellosis, tuberculosis, yellow fever): Master, doctorate and SENASAG plans and programs strengthened for control of zoonoses (rabies, brucellosis tuberculosis, foot-and-mouth disease).
- NCD intervention models with the CARMEN strategy: NCD intervention models with the primary care strategy. Models for the prevention of NCDs and related risk factors, within the framework of National NCD Plan (05-09) and the CARMEN initiative in priority municipios.
- Mental health and substance abuse: Support will have been provided for implementing National Mental Health, Anti-Violence, and Road Safety Plans, with emphasis on PHC, control of alcohol abuse and promotion of smoke-free areas.

HEALTH PROMOTION THROUGHOUT THE LIFE CYCLE

PURPOSE Health promotion. National program to promote health, with technical assistance from WHO (World Health Assembly 57.16). Support will be given to the MHSW in implementing the national health promotion program, with special orientation to family and community health, including children, adolescents, and older adults in the main areas of attention. Also, initiatives reinforced to integrate physical activity and sports as healthy behaviors.

EXPECTED RESULTS

- Promotion of active aging: Technical cooperation to help the Ministry of Health and the short-term social security system systematically and successfully promote active aging in their health services.
- Support for implementing programs to promote care and rehabilitation for people with disabilities.
- Support for implementing programs for people with disabilities.
- Support for incorporating physical activity and sports for health: Support for integrating physical activity and sports for health.

TECHNICAL COOPERATION AMONG COUNTRIES

PURPOSE Technical cooperation among countries.

EXPECTED RESULTS TCC (Technical Cooperation among Countries) Projects: TCC Projects.

BRAZIL

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

This is the country with the largest land area in Latin America. The situation in the country suggests that there is regional and intraregional polarization of health inequalities, determined primarily by: urban development, poverty, and the health services structure. National strategies are defined in government directives up to 2006 and in the National Health Plan, which seeks to consolidate the country's achievements. Brazil is a member of the WHO Executive Board (2004-2007). A Country Cooperation Strategy is pending for the second semester of 2005 (July-August).

The national priorities for PAHO/WHO technical cooperation are as follows:

- Support the tripartite national entities in order to decrease health inequities and inequalities in health management, services, and impact.
- Identify and develop National Reference Institutions and establish technical consortia to serve national priorities and ensure specific capacities in health processes and disease control.
- Support the country's political and technical processes for attainment of the MDGs.
- Support national and local discussions on health.
- Cooperate in intersectoral and interministerial lines of action with the subregional integration initiatives of MERCOSUR and the Amazon Cooperation Treaty Organization (ACTO).
- Cooperate in strengthening the essential public health functions with respect to information and human resources.
- Strengthen the Unified Health System (SUS), emphasizing managerial capacity in the three system areas and the development of health service networks for different age groups, the reduction of health inequities, and attainment of the MDGs.

PROJECTS

STRATEGIC MANAGEMENT OF COOPERATION

PURPOSE

To support the efficient and relevant presence of the Ministry of Health in the national health agenda as a national authority for the proposed policies, strategies, and defined technologies of the country, in a collaborative manner at state and municipal levels.

EXPECTED RESULTS

- To have established an agenda of work with the national health authorities and other related sectors to assure that the design, implementation, and evaluation of the technical cooperation respond to national priorities, and to foster a political and technical dialogue that facilitates the processes of cooperation with the country.
- To have institutional presence in the planning of initiatives related to the area of health, development, and the fight against poverty within the system of local coordination of the United Nations and regional mechanisms of integration.
- To strengthen the national capacity for the international insertion of Brazil in the field of health.
- To have planned, carried out, and supervised the management of budget resources of the Country Office, assuring internal control, and completion of the administrative rules without observations from the auditors.
- To strengthen the integration of Brazil in the regional initiatives in the areas of toxicology, ecology of the diseases of poverty, communicable diseases by vectors, and diagnosis and treatment of malaria.

COLLECTIVE HEALTH AND ENVIRONMENT

- PURPOSE** To provide technical cooperation oriented at increasing the national capacity for the definition of public policies oriented to favor environments and health ways of life and specific populations, to promote the prevention and reduction of risks and strategies for its implementation in the area of sustainable development and of the Millennium Development Goals, in consonance with the regional integration processes.
- EXPECTED RESULTS**
- Crosscutting and integrated multisectoral policies developed to strengthen local management and social participation in the area of health promotion of sustained development.
 - Horizontal cooperation of Brazil in the area of collective health and a strengthened environment with MERCOSUR and OTCA.
 - Strategies, methodologies, and instruments developed with intersectoral cooperation to improve the availability, surveillance, control, and reduction of health risks related to environmental factors.
 - Strategies and methodologies developed to implement public policies directed to specific population groups: indigenous peoples, African descendents, workers.

INFORMATION AND HUMAN RESOURCES FOR HEALTH POLICIES

- PURPOSE** Technical cooperation oriented to strengthen essential public health functions in the areas of information and human resources for sectoral health policies, considering the formulation of strategic actions that improve the national health development and the monitoring of the completion of the Millennium Development Goals.
- EXPECTED RESULTS**
- To continue developing strategies, methodologies, and models to improve the use of health information for the decentralized management of the national health system and for the monitoring of the main international objectives.
 - To have cooperated with the national counterparts to strengthen the capacity for producing, analyzing, and disseminating essential information for the development of health policy, by means of the implementation of the Interagency Network of Health Information (RIPSA).
 - To have consolidated cooperation strategies by means of knowledge networks and institutional consortiums involved in the scientific and technological development for the management and training of health workers, as well as to have given support to gestures of the SUS on these two topics.

DEVELOPMENT AND STRENGTHENING OF THE UNIFIED HEALTH SYSTEM (SUS): MANAGEMENT AND HEALTH CARE

- PURPOSE** Strengthening and development of the SUS with emphasis on the capacity of management in the three areas of the system and development of service networks for the health care of different age groups, to reduce health inequities and contribute to the completion of the Millennium Goals.
- EXPECTED RESULTS**
- Development of health policies and strengthening of the management of the SUS.
 - Development of the care model with regard to health care services of the SUS at all levels of care with specific special emphasis on the basic health services and family health teams, improving the quality of care and the humanization of services.
 - Support for the participation of Brazil in the international environment.
 - To have contributed to the strengthening of policies health promotion and care with regard to the children, adolescent/youth, and maternal populations.
 - To have contributed to the strengthening of the policies for prevention of intrafamily violence and gender violence, as well as promoting the incorporation of a gender focus in the health project and programs.

- To have contributed to the strengthening of psychiatric reform; to the elaboration of a national plan for mental health of children/juveniles; and to the development of strategies to promote mental health for the reduction and prevention of the abuse of alcohol and drugs.
- To contribute with the “Zero Hunger” program through supporting the intersectoral actions of the ministries in the social areas (Ministry of Social Development and the Fight Against Hunger [MDS], Ministry of Agricultural Development [MDA], Ministry of Health [MS], and the Ministry of Environment [MMA]) in order to achieve universal access to good quality food and human rights to adequate food (Millennium Goal 1: to fight hunger and extreme poverty) and through the expansion and consolidation of food and nutritional monitoring (SIVAN) and control of nutritional disturbances.
- To improve quality of essential products and services in public health, promoting their rational use in the different areas of management and health care levels of the SUS.
- Immunopreventible diseases: Functioning and updated surveillance system, monitoring and response.

DISEASE CONTROL AND PREVENTION

PURPOSE

- To develop technical cooperation that contributes to the strengths developed by the country through its initiatives, strategies, and management, control, and disease prevention programs to be socially relevant, integrated in the United Health System (SUS), with clear objectives and goals for the short-, medium-, and long-term, and in consideration of the principles of equity, universality, and integration, contributing to the improvement of the quality of life of the population.

EXPECTED RESULTS

- Surveillance, management, control, and prevention of communicable diseases.
- Surveillance, management, control, and prevention of the zoonosis and emerging and re-emerging diseases, as well as food safety and health monitoring.
- Surveillance, management, control and prevention of the noncommunicable diseases and their principal risk factors.

CANADA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Promoting the common values of PAHO and Canada of equity and Pan Americanism through:

- . Universal access to quality, not-for-profit, health care services
- . Equity for marginalized populations, including indigenous populations
- . Promoting the population health/determinants of health approach

Contributing to the achievement of the Millennium Development Goals (MDGs) and the goals agreed to at the Summit of the Americas through the agreed priority areas of:

- . Prevention and control of communicable and non-communicable diseases
- . Improving food security and nutrition
- . Improving access to clean water/sanitation
- . Improving sexual and reproductive health, including safe motherhood
- . Strengthening of health systems
- . Fostering the implementation of sound public (health) policy
- . Promoting healthy lifestyles and social environments and safe physical environments
- . Promoting healthy growth and development
- . Strengthening disaster management
- . Improving universal access to integrated and sustainable health systems for individual and public health
- . Promoting effective health input into social, economic, cultural, and development policies.

Focusing on PAHO's key countries and others of particular interest to Canada:

- . Bolivia
- . Brazil
- . Cuba
- . Guyana
- . Haiti
- . Honduras
- . Mexico
- . Nicaragua
- . The Caribbean

PROJECTS

COOPERATION ACTIVITIES

PURPOSE

To improve national, regional, and global programs by using Canadian expertise and approaches and enabling Canadian participation in meetings, workshops, and activities.

EXPECTED RESULTS

- . Canadian Cooperation: 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

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

EXPECTED RESULTS

- . Support, participation and knowledge of PAHO: Canadian support for, participation in, and knowledge of PAHO programs will increase tangibly.
- . Internship Program: Yearly exchange of young Canadian interns to PAHO Headquarters and field offices

CHILE

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Chile is characterized by a development model based on the principles of economic neoliberalism, strengthening the key areas of globalization, the free international market, integration in global, regional and subregional blocs, with the State as Regulator. At the same time, it promotes programs that provide social benefits. Health care reform is a priority and consists of five related laws that are expected to be implemented in 2005-06. International technical cooperation is facilitated by the International Cooperation Agency of the Ministry of Foreign Relations, which allocates resources to specific projects linked to governance, development of its institutional apparatus, and technology transfer. CCS for the first semester 2006.

The priorities for PAHO/WHO technical cooperation are as follows:

- Participate in technical formulation of investment projects carried out with external financing, complementing its role with that of other agencies.
- Mobilize and coordinate regulatory and strategic aspects of projects focused on international, subregional, transborder, and horizontal cooperation initiatives.
- Strengthen the steering role of the Ministry of Health as an intrasectoral and extrasectoral channel for negotiation and articulation.
- Mobilize national and international human resources, obtaining the best available technical expertise.
- Restructure the Representative Office and its management so that it exercises international liaison functions.
- Support the strengthening of epidemiological surveillance capacity and develop policies that integrate gender, equity, ethnic, human rights, and life cycle perspectives.
- Facilitate subregional support for infectious disease control, drug policy, and the environment.
- Strengthen relations with the legislature, other sectors, and public organizations.
- Coordinate with the United Nations system, with special emphasis on monitoring attainment of the MDGs.

PROJECTS

MANAGEMENT AND COORDINATION OF COUNTRY PROGRAMS

PURPOSE

To manage and coordinate technical cooperation (TC) in the country.

EXPECTED RESULTS

- Technical Cooperation Model: TC model developed according to needs identified jointly with counterparts.
- Technical and Administrative Execution of TC: Lines of work and activities developed that are related to the policy, technical, and administrative execution of TC in the country.
- Development and Strengthening of Human Resources: Human resources developed and strengthened according to the directives and guidelines issued by Headquarters, with a focus on improving technical cooperation in the country.

NATIONAL STEERING ROLE AND MANAGEMENT IN HEALTH

PURPOSE

To strengthen the national steering role and management in health.

EXPECTED RESULTS

- Health Authority: Institutionality of the health authority strengthened.
- International Health: Participation in international health promoted.
- Pan American Institute for Food Protection and Zoonoses (INPPAZ): Food security activities related to Hazard Analysis and Critical Control Points (HACCP) supported.
- PANAFTOSA: Activities to control foot-and-mouth disease, spongiform bovine encephalopathy, and other zoonoses important to public health supported.
- Regional Support for Strategic Health Development: Cooperation provided on topics pertaining to the Commission on Macro Social Determinants, National Health Accounts, and the Human Resources Observatory.

KNOWLEDGE MANAGEMENT IN HEALTH

PURPOSE

To strengthen activities to produce, disseminate, and make use of knowledge in health to improve monitoring of the attainment of the Millennium Development Goals (MDGs) and other work areas.

EXPECTED RESULTS

- Citizen Participation: Public policy in place that ensures citizen participation in health decisions at all levels.
- Strengthening Primary Health Care (PHC): The role of PHC in the implementation of reform policies strengthened in a way that maintains achievements and improves quality from a human rights, gender, intercultural, and technical perspective, with emphasis on making progress toward attaining the MDGs.
- Mainstreaming Approaches: Gender, cultural diversity, and human rights approaches mainstreamed into policies, with emphasis on attaining the MDGs, especially those related to HIV/AIDS in the country.
- Research on Local Sustainable Development: Research on local sustainable development, with emphasis on empowering communities in health.
- Pan American Center for Sanitary Engineering and Environmental Sciences (CEPIS): Support provided for general environmental surveillance activities.
- Public Health Surveillance: Public health surveillance strengthened to increase knowledge in health and assess the impact of programs and policies.
- Public Health Research: Public health research strengthened to increase knowledge in health and assess the impact of programs and policies.
- Use of Information: Information about knowledge in health and the results of public health actions prepared and disseminated to various societal actors, incorporating this information into program and policy development.
- Bioethics Unit: Bioethical response made to issues related to the implementation of reforms.
- Latin American and Caribbean Center on Health Sciences Information (BIREME): Support provided for installation of a virtual health library (VHL) in Chile.
- Regional Support for Health Analysis and Information Systems (AIS): Cooperation provided in the development of core data in Chile.

PROMOTION OF AN INTEGRATED HEALTH SYSTEM RESPONSE

- PURPOSE** To cooperate on and contribute to health system reorganization, decentralization, and management processes to facilitate achievement of the health objectives established for the decade, within the framework of United Nations, World Health Organization, and PAHO mandates.
- EXPECTED RESULTS**
- Organizational and Technical Capacity: Organizational, technical, analytical, and evaluative capacity of the public health system strengthened, with special attention to disadvantaged populations (indigenous peoples).
 - Strengthening Human Resources: Education, management, and regulation of human resources strengthened.
 - Regional Support from the Area of Emergency Preparedness and Disaster Relief (PED): Cooperation provided in preparing health services for disaster prevention and mitigation.
 - Regional Support from Family and Community Health (FCH): Collaboration provided in programs to control obesity, vaccine-preventable diseases, and HIV/AIDS.
 - Regional Support from Disease Prevention and Control (DPC): Collaboration provided in programs to control emerging communicable and non-communicable diseases (cardiovascular diseases, diabetes, and cancer).
 - Regional Support from HRT: Cooperation provided in developing models for family care, indigenous health, blood banks, and efforts to harmonize drug regulations.

HEALTH AND SUSTAINABLE HUMAN DEVELOPMENT

- PURPOSE** To prepare technical cooperation that promotes health policies, projects, programs, plans, or initiatives that integrate the MDGs and the mandates of the United Nations in health, ensuring that the country meets those targets through intersectoral and community initiatives that have an impact on the social determinants of health.
- EXPECTED RESULTS**
- Citizen Participation: Public policy in place that ensures citizen participation in health decisions at all levels.
 - Strengthening Primary Health Care (PHC): The role of PHC in the implementation of reform policies strengthened in a way that maintains achievements and improves quality from a human rights, gender, intercultural, and technical perspective, with emphasis on making progress toward attaining the MDGs.
 - Mainstreaming Approaches: Gender, cultural diversity, and human rights approaches mainstreamed into policies, with emphasis on attaining the MDGs, especially those related to HIV/AIDS in the country.
 - Research on Local Sustainable Development: Research on local sustainable development, with emphasis on empowering communities in health.
 - Pan American Center for Sanitary Engineering and Environmental Sciences (CEPIS): Support provided for general environmental surveillance activities.

COLOMBIA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Technical cooperation scenario is influenced by two additional circumstances: the domestic armed conflict that has assailed the country for four decades, and the pronounced economic and social crisis which emerged in 1999 and has continued up to the present. Socioeconomic, demographic, and health indicators reveal significant differences within the country. The national health priorities are recorded in the Quadrennial Public Health Plan (2003-2006): expand coverage of the subsidized system, improve the quality of services at all levels, and resolve the hospital network crisis. Colombia is negotiating the North American Free Trade Agreement (NAFTA) with the United States. The Representative Office proposes the consolidation and strengthening of partnerships between the Office in the capital and field offices, other agencies in the system, centers of excellence, donors, and others. The national cooperation priorities described will be confirmed or changed during the CCS exercise, whose final document will be prepared at the end of the first semester 2005.

The priorities for PAHO/WHO cooperation will be addressed through these four related priority areas:

- . Comprehensive information system (health situation, monitoring health and health actions, supervision of document management/ health system performance).
- . Strengthen territorial management of health in order to develop competencies; Essential Public Health Functions (EPHF); decentralization; PHC; access to equitable, quality services.
- . Violence prevention; family and community health, maternal and child health, sexual and reproductive health, mental health; promote health and healthy environments, housing, and schools.
- . Reduce risks and contribute to peace; provide aid for natural disasters and complex emergencies, vulnerable and displaced populations, disease prevention and control, HIV/AIDS.
- . The primary areas for technical cooperation are: Millennium Development Goals, Health Promotion, and Primary Health Care.

PROJECTS

ORGANIZATION AND MANAGEMENT OF THE PAHO/WHO REPRESENTATIVE OFFICE AND SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

To include priority public health goals in the National Strategic Health Plan and attain them by strengthening national and territorial entities and implementing mechanisms in the health reform process aimed at universal access to promotional and therapeutic health services of acceptable quality, including the analysis and proposal of solutions to reduce inequities.

EXPECTED RESULTS

- . Coordination of Technical Cooperation (TC) Initiatives: PAHO/WHO technical cooperation initiatives coordinated with governmental agencies, Colombian civil society, and the most relevant actors from the international community such that public health actions can be implemented in keeping with the goals and strategies defined in the National Strategic Health Plan.
- . Technical Cooperation among Countries (TCC) Projects: The Representative Office and the Ministry of Public Health will have managed and strengthened TCC projects to boost national capacity and improve integration between countries in the initiatives' priority areas.
- . Administrative Processes: Administrative processes defined that adequately meet the needs and fit the strategies of the Representative Office's TC, and whose operations facilitate the management of those needs and strategies as the available resources permit.

REDUCTION OF RISK FACTORS AND DISEASE PREVENTION AND CONTROL

PURPOSE	To reduce the impact of communicable and non-communicable disease determinants and the harm caused by these diseases, with emphasis on diseases targeted in national and international commitments.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Strengthening of Functional Groups: The performance and competencies of groups operating at the national and subnational levels strengthened in order to promote activities that reduce and/or eliminate priority communicable diseases in the country, within the context of the Social Security System for Health. • Strategies to Reduce Risk Factors and the Disease Burden: Strategies to reduce the burden of non-communicable diseases and their risk factors coordinated, promoted, and evaluated in keeping with national priorities. • Strengthening of Functional Groups at the National and Subnational Levels: The capacity of these groups to carry out activities that mitigate the impact of zoonotic, emerging, and reemerging diseases strengthened. Reducing these diseases is of economic importance to the national and international trade in animals and their products. • Strengthening the Ability of Intersectoral Groups to Understand and Prevent the Impact of Food-borne Disease (FBDs): Knowledge of these groups strengthened, using that information for decision-making.

ENVIRONMENTAL HEALTH AND HEALTHY SETTINGS

PURPOSE	To strengthen sanitary, environmental, and social conditions to reduce risks to the health of the Colombian people.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Water and Sanitation: Contributions to strengthening national capacity for analysis, monitoring, and control of physical, chemical, and biological risks in the environment and the workplace. • Healthy Settings: Intersectoral development of healthy settings and healthy lifestyles promoted through a community approach.

HEALTH INFORMATION AND KNOWLEDGE

PURPOSE	To improve access by relevant entities involved in the health sector, including the government, to structured, quality information (including the Millennium Development Goals) that allows for evidence-based monitoring and decision-making in policy formulation, disease control, and management of services.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Strengthening of the National Level: Technical standards, regulations, instruments, studies, and support plans for health information prepared and implemented by national institutions in accordance with their national steering role functions. • Strengthening of the Territorial Level: Competencies of territorial entities strengthened in public health monitoring and health situation analysis. • Knowledge Management: National institutions and United Nations agencies will have participated in a consensus-based knowledge management model in health (that also includes the use of virtual systems).

FAMILY AND COMMUNITY HEALTH

PURPOSE	To reduce access barriers to family health services with the aim of ameliorating inequities and attaining the Millennium Development Goals (MDGs).
EXPECTED RESULTS	<ul style="list-style-type: none"> • Management capacity to implement strategies strengthened at the national level and in selected areas in order to increase vaccination coverage and bolster epidemiological surveillance for the control and/or eradication of vaccine-preventable diseases.

- Formulation and/or strengthening of policies, managerial capacity, and implementation of interventions promoted as a way to improve the health of children, adolescents, and vulnerable groups, taking into account the objectives of the MDGs at the national level and in selected areas.
- Sexual and reproductive health policy disseminated, executed, and consolidated at the national level and in selected areas as a function of Millennium Development Goals 5 and 6.
- Strategies implemented for the prevention of sexually-transmitted diseases, surveillance of HIV/AIDS, and interruption of the poverty-violence-HIV/AIDS cycle at the national level and in selected areas.

DEVELOPMENT OF AND UNIVERSAL ACCESS TO HEALTH SERVICES

PURPOSE

To make progress toward guaranteeing the right to health through more equitable access to quality personal and collective health services and the expansion of insurance coverage.

EXPECTED RESULTS

- Extension of Social Protection in Health: National system of social protection in health strengthened, with emphasis on the steering role function of the social security system for health, management of health risks, and the delivery of essential public health functions.
- Territorial Management of Health: Territorial management capacity for public health at the subnational level strengthened, contributing to progress toward decentralization.
- Management of Health Services: Improvements in the organizational and management capacity of public providers and services networks to deliver personal and collective health services.

HEALTH DURING DISASTERS AND COMPLEX EMERGENCIES

PURPOSE

To reduce vulnerability and improve the response to the health needs of at-risk and displaced populations in disasters and complex emergencies.

EXPECTED RESULTS

- National and Subnational System: National and subnational systems for disaster prevention and relief strengthened in departments where PAHO has a field office.
- Demand for Technical Cooperation: Demand met for technical cooperation that responds effectively to emergencies and disasters.
- Institutional Capacity: Institutional capacity to respond to the health needs of displaced and vulnerable populations improved in departments where PAHO has a field office.

COSTA RICA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Costa Rica is regarded as one of Latin America's most stable and solid democracies. For many years now, the country has maintained its political commitment to promoting social development. During the 1990s, Costa Rica made great strides in poverty reduction. Its improved social indicators are comparable to those of middle-income countries. With respect to the Millennium Development Goals (MDGs), Costa Rica has already reduced extreme poverty by 50 percent, worked to promote gender equality, and is on the road to reaching or exceeding other MDGs by 2015. Despite these successes, the country faces new problems and challenges. While Costa Rica has a universal health system in place, nearly 30 percent of the country's poor have problems accessing the services for the uninsured and poor offered by the Costa Rican Social Security Administration (CCSS). There are marked contrasts in education and access to basic services for ethnic minorities (Afro-Costa Ricans and indigenous ethnic groups) and emigrants. A trend toward stabilization is observed in the leading causes of morbidity and mortality that threaten the progress made in this area. In 2004, PAHO/WHO developed the Country Cooperation Strategy 2004-2007 (CCS), within the framework of the 2006-2007 Biennial Program Budget (BPB).

National priorities for PAHO/WHO technical cooperation:

- . Strengthen policies and strategies aimed at promoting, improving, and maintaining family and community health, with emphasis on the life cycle, gender, and equity.
- . Promote the construction of a culture of health, with emphasis on health promotion and the promotion of healthy lifestyles in individuals and the population at large.
- . Promote mental health using a comprehensive approach, with emphasis on social violence.
- . Strengthen national and local capacity to detect and analyze changes in the frequency and distribution of disease and develop strategies for the prevention and control of priority communicable diseases (i.e., dengue, tuberculosis, malaria, vaccines-preventable disease, HIV/AIDS, and zoonoses).
- . Strengthen national and local capacity to formulate policies, strategies, and intervention models to prevent and control noncommunicable diseases, with special emphasis on cardiovascular disease, cervical and breast cancer, hypertension, diabetes and obesity.
- . Improve environmental health, with emphasis on basic sanitation and integrated water resources management.
- . Promote actions aimed at reducing vulnerability to disasters.
- . Improve equity, access, quality, and ethical standards in the health services, with emphasis on primary care, giving priority to the most vulnerable groups (Afro-Costa Ricans, ethnic indigenous, and emigrant groups).
- . Manage investment, expenditure, and financing according to the values and principles of equity and solidarity and health sector priorities.
- . Consolidate the National Health Surveillance System.

PROJECTS

HEALTH SYSTEMS AND SERVICES DEVELOPMENT

PURPOSE

To strengthen Costa Rica's health sector by supporting the formulation and development of public policies, plans, and priority programs related to performance of the steering role and essential public health functions, and by supporting improvements in the coverage, quality, and equity of service delivery to best serve public health within the framework of primary health care (PHC) and the Millennium Development Goals (MDGs).

- EXPECTED RESULTS**
- Institutional capacity developed to formulate and execute of plans, programs, and regulations to implement policies in priority areas such as human resources, health research, and the modulation of health sector expenditure and financing.
 - Strengthened institutional capacity to perform the steering role and monitor essential public health functions at the different managerial levels of the Ministry of Health.
 - Strengthened social dialogue and community participation, with emphasis on extending social protection in health and local health planning.
 - Comprehensive Health Care Model implemented within the framework of primary health care, health promotion, and the MDGs, with emphasis on the life cycle, gender, and equity at the different levels care in the health services networks.

MANAGEMENT OF TECHNICAL COOPERATION AND SUPPORT FOR PUBLIC HEALTH DEVELOPMENT IN COSTA RICA

PURPOSE To ensure proper management of PAHO technical cooperation and promote the nation's participation in regional and subregional public health agreements and mandates, as well as Costa Rican technical cooperation with other countries.

- EXPECTED RESULTS**
- Technical cooperation projects managed within the framework of the Country Cooperation Strategy (CCS), national priorities, and PAHO's subregional and regional commitments, including technical cooperation projects with other countries.
 - The development processes of the Representative Office and staff training implemented as programmed.
 - Efficient and effective administrative support provided for the delivery of technical cooperation and routine operations of the Representative Office.

FAMILY AND COMMUNITY HEALTH

PURPOSE To support the development of policies and strategies to promote, improve, and maintain family and community health, with emphasis on the life cycle, gender, and equity.

- EXPECTED RESULTS**
- Strengthened national capacity to adapt and implement the health promotion policy and integrate it into plans and programs for maternal and child health, adolescent health, sexual and reproductive health, mental health, and drug abuse and violence prevention.
 - Strengthened institutional capacity to design health promotion strategies geared to the MDGs, as well as national plans and programs, with emphasis on infant and maternal mortality reduction, adolescent health, and sexual and reproductive health.
 - Health promotion integrated into national plans and programs for mental health and drug abuse and violence prevention.

EPIDEMIOLOGY AND DISEASE PREVENTION AND CONTROL

PURPOSE To strengthen the capacity to organize and analyze existing information at the different management levels of the system, as well as the national capacity to detect and analyze changes in the frequency and distribution of communicable and non-communicable diseases and to develop strategies for their prevention and control.

- EXPECTED RESULTS**
- Greater capacity in the country to organize and analyze existing information and to improve the timely planning, programming, execution, and evaluation of intervention measures at different management levels of the health sector.
 - Strengthened national and local capacity to detect and analyze changes in the frequency and distribution of priority communicable diseases, and to develop strategies for their prevention and control (dengue, tuberculosis, malaria, vaccine-preventable diseases, HIV-AIDS, and zoonoses).

- Strengthened national and local capacity to formulate policies, strategies, and intervention models to prevent and control non-communicable diseases, with special emphasis on cardiovascular disease, cervical cancer, breast cancer, hypertension, diabetes, and obesity.
- Greater national capacity to rapidly detect, identify, investigate, and respond to reports of epidemics and/or outbreaks of emerging infectious diseases by setting up rapid response teams, training health care providers in diagnosis and reporting, and ensuring the availability of guidelines for the required treatments (severe acute respiratory syndrome [SARS], leptospirosis, West Nile virus, Venezuelan equine encephalitis, etc.).
- Strengthened laboratory networks to improve the diagnosis of potentially epidemic agents and to prepare and implement contingency plans that maintain the minimum conditions necessary for biosafety in laboratories, thus preventing improper use, contamination, or deficient management of these agents.

SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH

PURPOSE	To contribute to the development and sustainability of drinking water and sanitation services as well as access to them, to the reduction of environmental health risks, and to food and nutritional security as essential actions for sustainable human development within the framework of the Millennium Development Goals.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Strengthened national institutional capacity to improve service quality by taking the steps recommended in the sectoral study on drinking water and sanitation. • Strengthened health and environmental programs as well as “healthy spaces” initiatives, with citizen participation, at the sector’s different institutional delivery levels. • The preparation of technical proposals and programs to reduce the vulnerability of health sector infrastructure to natural and man-made disasters promoted and strengthened. • The area of food and nutrition security (FNS) strengthened in areas of social and political integration in the country.

PED—SUBREGIONAL

PURPOSE	To reduce the impact of disasters on the health sector by strengthening the capacity for response to and assessment of emergencies and disasters.
EXPECTED RESULTS	<ul style="list-style-type: none"> • National programs for risk management in the health sector developed, strengthened, and in the process of consolidation. • Improved health sector capacity to respond to emergencies and disasters. • Interinstitutional and interagency relations strengthened inside and outside the Region. • Support provided to reduce the vulnerability of health facilities.

GENDER AND ETHNIC EQUALITY IN HEALTH IN THE CENTRAL AMERICAN SUBREGION

PURPOSE	To strengthen the subregional capacity to evaluate health determinants as well as the overall health situation as part of the reform process, with a view to reducing gender inequities in health.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Technical assistance provided to seven countries and the gender equality policy integrated in four Representative Offices. • The conceptual and methodological framework for integrating gender equity into reform policies designed and introduced in two Central American countries. • The gender-based model for addressing violence consolidated in the comprehensive health service programs of four countries.

CUBA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Cuba continues to follow a developmental strategy based on equity, universality, and free social services, including health services. Health system development has focused primarily on PHC. Moreover, the government seeks to ensure a basic level of nutrition and essential goods, and differential treatment for vulnerable groups. The government continues to give high priority to health and education. Therefore, the MDGs are expected to be met. The country has economic limitations and has been affected by natural disasters (storms and hurricanes). Cuba has 11 Collaborating Centers and 17 potential institutions of excellence. The government seeks to develop the CCS. Cuba is a member of the PAHO Executive Committee (2004-2007).

The national priorities for PAHO/WHO technical cooperation are as follows:

- Provide support for different levels of the national health system and other sectors through actions oriented towards surveillance systems, improved quality evaluation processes, health regulation, and control of products and services.
- Provide support for PHC by developing local public health services, comprehensive training programs for health workers, better response to health care demands and needs, development of healthy environments, improved social participation, and increasing multisectoral and intersectoral actions.
- Contribute to the upgrading and development of human resources, as well as scientific research, by improving coordination with the scientific sector, the international dimension of public health, the adoption of technologies, exchanges between countries, health situation analysis, and the mobilization of resources through collaboration and Pan-Americanism.
- Support national policies and strategies aimed at health development, meeting national priorities, forging international partnerships, and promoting its potential for cooperation.

PROJECTS

COUNTRY PROGRAM

PURPOSE

To improve the capacity of the PAHO/WHO Representative Office in the country in response to technical cooperation needs.

EXPECTED RESULTS

The project for full development of the Representative Office implemented.

STRENGTHENING OF THE NATIONAL HEALTH SYSTEM

PURPOSE

To guide technical cooperation in strengthening the various levels of the NHS and other sectors, through actions geared toward surveillance systems, the enhancement of quality evaluation processes, and the regulation and standardization of health products and services.

EXPECTED RESULTS

- Quality of medical care, health services, and drug manufacturing improved, and managerial, accreditation, and regulation processes strengthened.
- Special programs to reduce risks and threats to health strengthened.
- Hygiene and epidemiology, environmental health, and statistics. Control of communicable and non-communicable diseases further developed, as well as healthy settings with the corresponding reduction of environmental health risks, through the strengthened capacity in the hygiene, epidemiology, microbiology, and statistics subsystems.
- National and provincial capacities increased in terms of intersectoral actions to control disease by strengthening education and health promotion in support of the program to improve national health and the quality of life.

STRENGTHENING OF PRIMARY HEALTH CARE

PURPOSE

To guide technical cooperation in strengthening primary health care through the development of public health practices in local settings and in processes related to comprehensive education for health workers, greater attention to health needs and demands, the development of healthy settings, the improvement of social participation capacity, and the strengthening of multi- and intersectoral approaches.

EXPECTED RESULTS

- Decentralization of technical cooperation will have contributed to articulation of the national priorities identified, which in turn should be studied and assimilated based on the health situation analysis of each municipality, as expressed in strategic planning exercises, taking cooperation priorities with PAHO/WHO into consideration.
- Hygiene and epidemiology, microbiology, and vector control. Hygiene, epidemiology, microbiology, and vector control subsystem in primary health care strengthened to boost institutional capacity in terms of knowledge about health status and decision-making and improve local response capacity.
- Gender approach integrated into technical cooperation programs, and support provided for scientific and technical development of the National Group on Gender and Health, with an emphasis on municipal projects.
- National, provincial, and local capacity increased for the implementation of promotion and education strategies in the areas of health and food and nutrition security in selected municipalities in the country.
- Projects designed in public health. Projects especially designed at the local level with the support of other NHS agencies in groups of municipios, where the Social Security Administration so advises in the more complex areas of public health.

UPGRADING AND DEVELOPMENT OF PUBLIC HEALTH

PURPOSE

To upgrade and develop human resources and scientific research by strengthening coordination with the scientific arena, the international dimension of public health, the assimilation of technology, exchange among countries, health situation analysis, and the mobilization of resources based on collaboration and Pan-Americanism.

EXPECTED RESULTS

- The professional performance of students and professors of the medical sciences strengthened by the development of new knowledge and information technologies, and national health system workers trained in keeping with their occupational profiles, incorporating the gender approach.
- Integration of scientific activity. Mechanism for scientific integration strengthened in settings ranging from research centers to polyclinics and other health units to bolster scientific activity and the network of collaborating centers.
- Institutional capacity in science and technology. Contribution made to boosting institutional capacity to enable science and technology to act as decisive factors in the sector's sustained recovery and growth, developing a culture of innovation that becomes a systematic work tool in all units of the national health system.
- Information technology and knowledge network (INFOMED) strengthened to facilitate access to the available products and services found in it for the entire Cuban health system and that of other countries.
- Technical cooperation contributed to improved participation on the part of Cuba and PAHO/WHO in the area of international public health, emphasizing collaboration, solidarity, and Pan-Americanism, particularly in disaster situations and in the case of priority countries.

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

To support national policies and strategies with a view to developing health, national priorities, international partnerships, and the promotion of cooperation potential.

**EXPECTED
RESULTS**

- Coordination networks strengthened.
- Activities inherent to PAHO/WHO technical cooperation with Cuba strengthened.
- Cuba's scientific and technical potential for international technical cooperation, particularly with priority countries, promoted through PAHO/WHO technical cooperation in the Region of the Americas.

DOMINICAN REPUBLIC

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Over the past decade, the Dominican Republic has experienced high levels of political, economic, and social volatility. During the last three years, its macroeconomic stability has been tested by a banking crisis, persistent inflation, and a deepening electric power crisis. This situation has led to an increase in the number of people living below the poverty line, the greatest concentration of poverty being located along the country's border with Haiti. The Dominican Republic is prone to a variety of natural disasters, including hurricanes and earthquakes. As part of the state modernization process, the country has embarked on a series of health sector reforms geared to decentralization and increasing the availability of services and drugs, and it has adopted important measures to address problems of health service coverage, organization, management, and quality. Noteworthy in this regards it's the creation of new structures as a result of health and social security legislation: the National Social Security Council, Office of the Health Authority, National Health Insurance, and the National Health Council. The national objective continues to focus on reducing disparities and the targeting of vulnerable groups. The formulation of the 2006-2007 Biennial Program Budget is based on analysis of the health situation and its determinants and the national commitment to attainment of the MDGs.

National priorities for PAHO/WHO Technical Cooperation are as follows:

- Strengthen the National Health Authority's steering role and its performance of the essential public health functions (EPHF).
- Develop the Dominican Social Security System as a strategy for expanding social protection coverage. Develop strategies to achieve the MDGs, with emphasis on reducing disparities.
- Develop partnerships for strengthening priority programs, including programs to prevent, control, and eliminate communicable and noncommunicable diseases, and thus enhance protection of family and community health.
- Improve environmental health, with emphasis on basic sanitation and integrated water resources management, and strengthen institutional capacity to facilitate the construction of healthy spaces.
- Promote actions aimed at reducing vulnerability to disasters and mitigating their effects.
- Develop the National Epidemiological Surveillance System and the capacity to respond to epidemic outbreaks.
- Strengthen Pan-Americanism and solidarity among countries, especially with Haiti.

PROJECTS

NATIONAL HEALTH DEVELOPMENT, ENVIRONMENTAL HEALTH, AND SOCIAL PROTECTION

PURPOSE

To adapt the Public Health and Social Assistance Secretariat (SESPAS) to its new role, as described in the General Health Law and the law creating the Dominican Social Security System, through austere and transparent functional reorganization and restructuring, as required by present circumstances in the Dominican Republic; and to improve the population's health status by strengthening activities in health promotion and risk and disease prevention and by facilitating the population's participation in creating healthy settings (Government Program 2004-2008, and 10-year National Health Plan 2004-2014).

EXPECTED RESULTS

- Policies, norms, methodologies, and instruments designed to develop and strengthen the steering role the National Health Authority and its performance of the EPHF

- Delivery networks designed, care model developed, and affiliation mechanisms reviewed for the development of the Dominican Social Security System as a strategy to extend social protection.
- Initiatives, methodologies, and strategies developed to achieve the national health targets set forth in the MDG, emphasizing the reduction of inequities, and maintaining and improving the gains made toward achieving these goals.
- Priority programs strengthened through partnerships, networks, technical support, and monitoring; these include the prevention/control/elimination of communicable diseases and the prevention and control of non-communicable diseases to protect family and community health and to maintain and expand the achievements made.
- Scientific and technical information related to health in the Dominican Republic and the Region collected, analyzed, disseminated, and utilized, applying available methodologies to manage information.
- National capacities developed in health-sector institutions, tourism, water, and sanitation to formulate and apply policies, plans, and models that foster development of healthy environments.
- National Epidemiological Surveillance System (SINAVE) and developed, along with the capacity to respond to health risks and threats, including epidemiological emergencies and the network of public health laboratories.
- Quality of health information improved, together with its analysis, production, and dissemination for monitoring the health situation, inequalities, follow-up on the MDG and on health policies, plans, and programs.

DEVELOPMENT OF THE CAPACITY FOR DECENTRALIZED MANAGEMENT FOR LOCAL HEALTH DEVELOPMENT

PURPOSE

To improve the quality of and the population's access to health care in public facilities, via a strengthening and institutional development program for these facilities, including the adaptation of infrastructure, training of human resources, and their reorganization and transformation to efficient, decentralized regional health networks with alternate mechanisms for budget transfer and the expansion of coverage; and to create conditions for the population to access drugs in a timely manner and at low cost by converting PROMESE into a supply center. (Government Program 2004-2008).

EXPECTED RESULTS

- Subnational capacities developed and strengthened for adequate exercise of the steering role and performance of the EPHF.
- Regional public networks designed to provide methodological and management services and instruments to handle risk, in accordance with the new legal framework.
- Family care model developed and primary health care and environment strategy applied at subnational levels to attain the Millennium Development Goals and to protect and improve the advances made.
- Local personnel with access to health information, emphasizing the use of information technologies.
- National Epidemiological Surveillance System strengthened and with the capacity to prevent and control health risks and threats, including its response to epidemiological emergencies.
- Health information system and the capacity to analyze and disseminate information developed, including monitoring of the MDG goals and indicators.
- Priority programs for the prevention/control/elimination of communicable diseases and for the prevention and control of non-communicable diseases updated and improved at decentralized levels for local health development.

DEVELOPMENT OF COLLABORATIVE BORDERS AMONG COUNTRIES

PURPOSE

To strengthen Pan-Americanism and solidarity among the countries of the Region, particularly Haiti.

EXPECTED RESULTS

- Technical exchange and the sharing of experiences in priority health areas promoted between Haiti and the Dominican Republic based on agreements ratified by the two countries.
- National Health System and surveillance systems developed, including laboratory diagnosis of priority diseases.

DEVELOPMENT OF INTERNAL MANAGEMENT AT THE REPRESENTATIVE OFFICE TO STRENGTHEN TECHNICAL COOPERATION

PURPOSE

To develop the technical cooperation projects of the Representative Office with the support needed for their adequate implementation.

EXPECTED RESULTS

- Cooperation projects executed in accordance with global commitments and national priorities, meeting the administrative standards of the Organization.
- The technical-administrative team of the Representative Office with the capacity to manage the technical cooperation program efficiently.
- Plan for the comprehensive development of the Representative Office updated, incorporating normative, organizational, and human resources development aspects in particular.
- Country team with the capacity to respond to emergencies or disasters inside or outside the Office.

ECUADOR

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The critical political situation is reflected in phenomena such as the fact that there have been 10 presidents in the past 10 years. The unfinished agenda is perpetuated by poverty and inequity. Four out of 10 people in urban areas and 8 out of 10 in rural areas live in poverty. Efforts have been made to reduce the current gaps in equity, implement strategies to combat poverty, and give priority to coverage for the most vulnerable social sectors. There is a program that offers increased health care coverage and a free health care card for the poorest population. Ecuador is a member of the WHO Executive Board (2003-2006). Cooperation has been reoriented on the basis of the joint evaluation (2000-2001). According to plans, the CCS will be prepared by the second semester 2005.

The priorities for PAHO/WHO technical cooperation are as follows:

- Support health care reform and the universal insurance process, cooperating in processes that foster social control, validation of national health policy, and development of the national health system.
- Support the primary care strategy and promote health in order to integrate programs in a new health care model that fosters family and community health, social participation, and healthy environments and lifestyles in a decentralized democratic system.
- Strengthen the capacity of the health sector and other sectors and institutions to control environmental risks, promote healthy environments and disaster relief, and foster joint work on programs.
- Prevent the transmission of vector-borne diseases through action by different sectors, environmental planning, and social participation.
- Strengthen and/or develop evidence-based multifactorial interventions to control communicable and noncommunicable diseases.
- Strengthen the capacity to avert vaccine-preventable diseases in humans and animals, conduct surveillance and investigations of outbreaks, deal with epidemiological emergencies and emerging and reemerging diseases.
- Develop the knowledge and skills to adopt a culture of change towards use of scientific and technological information.
- Create opportunities for discussion, analysis of knowledge, and dissemination of information.
- Support fulfillment of international commitments assumed for monitoring and evaluating the MDGs.

PROJECTS

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

To orient technical cooperation to make it consistent with national policies and plans, the development of the National Health System and health sector reform processes, and the Pan American and global health agenda, 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, Headquarters, and PAHO's specialized Centers.

EXPECTED RESULTS

- Coordination of political, technical, and administrative cooperation processes, as set forth in PAHO's Strategic Plan 2003-2007, the Representative Office's Development Plan 2006-2007, and the Health Plan 2003-2007.

- Development of processes and staff efficiency in the Representation to facilitate technical cooperation activities.
- Design, programming, and execution of projects in the area of technical cooperation among countries.

COUNTRY PROGRAM MANAGEMENT AND COORDINATION

PURPOSE To coordinate and orient support for the development, management, and administration of technical cooperation projects through the use of up-to-date procedures and the application of PAHO standards and regulations, resulting in efficient and timely technical cooperation.

EXPECTED RESULTS

- Technical cooperation developed in an appropriate physical environment and support personnel trained to meet the needs of the Office.
- Administrative, logistical, and operational support is received for technical cooperation, to help meet technical cooperation goals.

UNIVERSAL ACCESS TO HEALTH SERVICES

PURPOSE To guarantee the excluded Ecuadorian population permanent uninterrupted access to health services, consistent with the principles of equity, universality, solidarity, and quality.

EXPECTED RESULTS

- National Health System under construction under the leadership of the Ministry of Health and the decentralized management of cantonal and provincial health councils to ensure social protection for the most vulnerable population.
- Service network of the MOH and other public agencies strengthened, and health care coverage increased for at-risk groups through a comprehensive family and community health model, based on PHC, health promotion, and licensing.
- Human resources to support construction of the National Health System and strengthen the service network.

CONTROL OF DISEASES AND ENVIRONMENTAL RISKS

PURPOSE To strengthen the National Health System for action in public health, reorganization, environmental management, disease prevention and control, and management of risks and natural disasters, integrating health promotion and primary care capacities (PHC and PEC) intersectoral.

EXPECTED RESULTS

- Contribution made in meeting the MDGs in the areas of health and environment.
- Policies, plans, and projects for environmental management and development, health promotion, and primary environmental care implemented at the national, provincial, and cantonal level, and environmental risk analysis capabilities strengthened with the support of the Pan American Center for Sanitary Engineering and Environmental Sciences (CEPIS).
- Morbidity and mortality from communicable and non-communicable diseases and malnutrition reduced through methodologies, models, and technologies in biological prevention, risk reduction, and interruption of transmission, guided and documented by a sensitive epidemiological surveillance system.
- National Health Network's response capacity to emergencies and disasters strengthened through policies, standards, preparedness, prevention, and mitigation, using an intersectoral approach.

INFORMATION AND KNOWLEDGE MANAGEMENT IN HEALTH

PURPOSE To integrate and optimize strategies to generate and apply health knowledge, supporting the development and maintenance of information and communication, using the available technology infrastructure.

EXPECTED RESULTS

- Production, dissemination, and effective use of health information and documentation improved, strengthening the VHL, observatories, situation rooms, and other pertinent tools to meet the country's needs while adhering to scientific and technical standards.
- Interinstitutional commissions and groups for research and science and technology development strengthened and consolidated at the national and subnational level, supporting human resources education in the fields of research, epidemiology, and health statistics and fostering strategic partnerships, networks, and associations that support health information and knowledge management strategies.

SUBREGIONAL DISASTER PREPAREDNESS PROGRAM

PURPOSE

To reduce the health impact of disasters in the South American population.

EXPECTED RESULTS

- Institutional capacity for disaster preparedness improved in the countries of the subregion.
- Materials on disasters designed and prepared at the regional level.
- Activities to reduce the impact of disasters on the health sector, water, and sanitation strengthened.
- Countries' institutional capacity to respond to emergencies, disasters, and complex emergencies improved.

EL SALVADOR

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

El Salvador has made significant progress in the political, economic, and social spheres. On average, the country has improved a number of relevant social indicators while reducing poverty and extreme poverty. El Salvador has achieved significant economic growth, increased social spending—especially in the areas of health and education—and improved access by the poor to basic public services. Despite this progress, much remains to be done, considering that income distribution has not improved and that, consequently, El Salvador ranks among the 20 percent of the countries with the highest Gini coefficient (a measure of inequality). Health indicators lag behind the average for the Region, social spending continues to be very low, and violence is an enormous problem. The government has developed an ambitious comprehensive care strategy for families living in extreme poverty (“Red Solidaria” or Solidarity Network), which works to improve indicators in the short term in the areas of nutrition, maternal and child health, and children’s education. Additionally, the strategy seeks to improve drinking water, sanitation, and other basic and support services for rural families living in extreme poverty.

National priorities for PAHO/WHO technical cooperation:

- Strengthen the regulatory function of health sector institutions with a view to controlling environmental risk factors and facilitating the construction of healthy spaces.
- Strengthen programs for disaster prevention, emergency preparedness, and disaster mitigation, vulnerability reduction, and response.
- Strengthen national capacity in the areas of policy-making, strategies, programs, and projects aimed at improving nutritional status and maternal-child health in the most vulnerable populations.
- Strengthen the capacity of the Ministry of Health to formulate social protection policies.
- Implement the comprehensive care model with a family care focus, based on primary health care (PHC).
- Develop and strengthen public health research.
- Strengthen national capacity to promote processes that facilitate better control over health and its determinants for individuals, families, and communities, with a view to reducing disparities and achieving the MDGs.
- Strengthen decentralization processes and develop human resources through community-based strategies.

PROJECTS

SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH

PURPOSE

To strengthen the normative capacity of health sector institutions in regulating and controlling environmental hazards to human health and to foster healthy environments.

EXPECTED RESULTS

- Systematic programs executed by the health sector, in coordination with other entities, to improve a safe supply of water for human consumption, with emphasis on quality, as well as on other aspects of sanitation, with the technical collaboration of Pan American Center for Sanitary Engineering and Environmental Sciences (CEPIS).
- Ministry of Public Health promoting national healthy settings policy as a contribution to sustainable human development.
- Sanitation programs for prevention, preparedness, mitigation, vulnerability reduction, response, and rehabilitation of the health services in emergencies and disasters strengthened.

- Situation with respect to food and nutrition insecurity improved in the most vulnerable populations, particularly women and children, by strengthening national and local policies, plans, programs, and projects.

HEALTH SYSTEMS

PURPOSE

To support health sector reform by strengthening the steering role of the National Health Authority in monitoring essential public health functions, extending social protection in health and improving the management and delivery of health services.

- Inequities in the population's access to comprehensive, sustainable health systems reduced through Ministry of Health coordination with health sector institutions on policies for social protection in health.
- Human resources leadership in the sector strengthened by generating and disseminating knowledge.
- Timely comprehensive care of the highest possible quality accessible to the most vulnerable population through a project to operationalize the model of family care model based on a renewed vision of PHC.
- Public health research developed and strengthened..

COMMUNICABLE DISEASES

PURPOSE

To develop the capacity to generate, analyze, and publish accurate and timely health statistics, with a gender approach, and to apply epidemiology in the formulation of standards for the prevention and control communicable and noncommunicable diseases.

EXPECTED RESULTS

- Morbidity and mortality from TB and TB/HIV co-infection reduced through the development of strategies to make the National Tuberculosis Control Program sustainable through the expansion of DOTS and the mobilization of society and resources.
- Morbidity and mortality from vector-borne diseases reduced.
- Health sector capacity to reduce morbidity and mortality in children strengthened.
- Antiretroviral treatment strengthened and the HIV/AIDS epidemic in adolescents and children reduced.

FAMILY AND COMMUNITY HEALTH

PURPOSE

To strengthen national capacity to promote processes favoring greater control over health and health determinants by individuals, the family, and the community to help reduce the existing gaps and attain the Millennium Development Goals.

EXPECTED RESULTS

- A culture of social harmony with a gender perspective promoted through policies, plans, programs, and projects.
- Community-based health strategies strengthened through decentralization, participation, and human resources development.
- High priority vaccine-preventable diseases reduced and controlled, increasing the impact of immunization services as a component of health care systems.

MANAGEMENT AND ADMINISTRATION

PURPOSE

To provide administrative support to technical programs in matters related to: personnel, budget and finances, supplies, general services, transportation, and safety.

EXPECTED RESULTS

Timely and efficient technical and financial cooperation delivered to the country.

Specialized technical cooperation in health optimized, and the technical cooperation program executed in an expeditious, efficient, and relevant manner.

NONCOMMUNICABLE DISEASES AND REDUCTION OF RISK FACTORS

PURPOSE

Contribute to the reduction of noncommunicable diseases and risk factors.

EXPECTED

. Premature morbidity and mortality from cervical and other types of cancer reduced.

RESULTS

. Programs for the prevention and control of diabetes and cardiovascular disease strengthened.

GUATEMALA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Guatemala is a multiethnic, multicultural, and multilingual nation. For the most part, its population its population is poor, rural, young, and indigenous. Since the signing of the Peace Accords, Guatemala has made significant progress on a series of historical and structural problems that have worked to hinder sustainable human development. However, the situation in the country is still very complex and works against its transition toward a society that is more equitable, participation, and respectful of human rights; one that can facilitate the attainment of the Millennium Development Goals (MDGs) and the consolidation of peace and democracy. Poverty and vulnerability predominate in rural Guatemala and among the country's indigenous population, with poor primary health and education indicators in terms of coverage and quality. With respect to health, progress has been concentrated primarily in sector reforms, taking steps toward decentralization and expanding coverage, as a result of Guatemala's Integrated Health Care System (Sistema Integrado de Atención de Salud). The absence of social insurance /social security system coverage for the poor is particularly serious. The social security system, whose reform was envisaged in the Peace Accords, fails to provide adequate service and has been repeatedly fraught with corruption. Guatemala has the lowest level of public spending in health of all the Central American countries. The current government launched its plan, known as "Vamos Guatemala" ("Let's go Guatemala"), based on three extensive strategies emphasizing revitalization of the economy and the targeting of a series of interventions in the areas of health, nutrition, and basic education in some of the most vulnerable municipios, selected because of their extreme poverty. PAHO has begun work on the Country Cooperation Strategy (CCS) 2006-20010, which will serve as a framework for adjusting the 2006-2007 BPB.

National Priorities for PAHO/WHO Technical Cooperation:

- Strengthen local development in health through decentralized, intensive, and interprogrammatic technical cooperation in priority municipios.
- Strengthen environmental health management, sustainable development and food and nutrition security through public policies and national/local strategies framed in the MDGs.
- Strengthen the management capacity of the Ministry of Health with a view to improving quality and increasing access to services and technologies, using a multicultural and equity based approach.
- Consolidate the family and health approach by taking life cycle, gender, and ethnicity into account in the design of programs and projects aimed at comprehensive care for the population.
- Increase the capacity for health situation analysis and timely, effective responses via social and intersectoral participation, with a view to preventing and controlling priority health problems.
- Strengthen institutional and sectoral capacity to reduce and mitigate disasters.

PROJECTS

STRENGTHENING LOCAL HEALTH DEVELOPMENT

PURPOSE

Improve local health development with support from decentralized, intensified interprogrammatic technical cooperation (DITC) in the municipios prioritized for cooperation.

EXPECTED RESULTS

- The CTDI strategy will have been institutionalized for management of regular programs and extrabudgetary projects.
- The Alta Verapaz health area will have increased its capacity for management and delivery of services.
- The Huehuetenango health area will have increased its capacity for management and delivery of services.

- The Ixcán health area will have increased its capacity for management and delivery of services.
- The Ixil health area will have increased its capacity for management and delivery of services.
- The Quiché health area will have increased its capacity for management and delivery of services.
- Technical capacity at the central level of the Ministry of Public Health and Social Welfare strengthened for the exercise of its steering role and supervision, monitoring, and evaluation at the local level.

ENVIRONMENTAL HEALTH AND SUSTAINABLE DEVELOPMENT

PURPOSE	Strengthen the management of environmental health, sustainable development, and food and nutrition security through implementation of public policies and national and local strategies aimed at the achievement of the Millennium Development Goals and the Peace Accords.
EXPECTED RESULTS	<ul style="list-style-type: none"> • National strategy for improving environmental health and sustainable development, with healthy public policies, will have been formulated. • Strategy for integrating food and nutrition security into national policies, plans, and programs will have been formulated. • Primary health care will have been made the basic strategy of Ministry of Public Health and Social Welfare programs for the promotion of healthy lifestyles and environments. • Proposals for promotion of the culture of risk management in Ministry of Public Health and Social Welfare will have been drafted.

ACCESS TO HEALTH SERVICES AND TECHNOLOGY

PURPOSE	Strengthen the managerial capacity of the Ministry of Public Health and Social Welfare to improve the quality and increase access to services and technologies, with an intercultural and equity-based approach.
EXPECTED RESULTS	<ul style="list-style-type: none"> • The comprehensive model of care for increasing coverage of priority populations will have been developed. • The proposal on transformation of the health system will have been drafted. • Access to essential drugs and traditional medicine will have been integrated into the health plan. • The legal and regulatory framework for access to safe blood and other health technologies will have been established. • The human resources development policy will have been formulated. • Research and bioethics activities will have been coordinated and regulated in the country through specific bodies.

FAMILY AND COMMUNITY HEALTH

PURPOSE	Consolidate the family and health approach based on the life cycle, gender, and ethnicity into programs and projects for comprehensive care for the population.
EXPECTED RESULTS	<ul style="list-style-type: none"> • The Ministry of Public Health and Social Welfare will have implemented a national strategy for the reduction of maternal mortality • The Ministry of Public Health and Social Welfare will have implemented comprehensive care strategies for children and adolescents. • The Ministry of Public Health and Social Welfare will have been evaluated and supported to maintain a useful vaccination coverage and surveillance of vaccine-preventable diseases. • Ministry of Public Health and Social Welfare programs, policies, and projects will have a gender

equity and ethnic approach by the end of the biennium.

- The managerial capacity of the Ministry of Public Health and Social Welfare's Mental Health Program will have been strengthened to integrate this component into PHC.

PREVENTION AND CONTROL OF PRIORITY HEALTH PROBLEMS

PURPOSE

Increase the capacity for health situation analysis and for timely and effective response with social and intersectoral participation for the prevention and control of priority health problems in the areas of communicable and chronic non-communicable diseases.

EXPECTED RESULTS

- The management of national programs for communicable and chronic non-communicable diseases will have been strengthened.
- National capacity for alert and response to epidemics will have increased.
- Strategic partnerships will have been established for prevention and control activities to meet the targets of the Millennium Development Goals
- National and international policies and strategies in food safety will have been applied.
- The health information and surveillance system will have been established at the central level and in the Health Areas.

MANAGEMENT AND SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

Plan and effectively execute the PAHO/WHO technical cooperation program in Guatemala with a strategic orientation and leadership in building partnerships and mobilizing resources to strengthen the health sector.

EXPECTED RESULTS

- Technical cooperation will have been executed in a decentralized, intensified, interprogrammatic, and interagency manner based on strategic planning, through the forging of partnerships.
- Technical cooperation among countries will have been strengthened through subregional integration initiatives for the prevention and control of communicable diseases, HIV/AIDS, vector-borne diseases, and zoonoses, and for environmental health, with emphasis on water and sanitation in the municipios on the four borders.
- The supply of technical cooperation will have increased through interprogrammatic management and coordination of the country program.
- The Development Plan of the Representative Office will have been implemented to achieve the four expected results, in order to maintain excellence in technical cooperation.

GUYANA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

As a Heavily Indebted Poor Country (HIPC) and PAHO Key Country, Guyana is one of the countries in the Region of the Americas that warrants close attention from PAHO/WHO. PAHO/WHO has developed a Country Cooperation Strategy (CCS) 2004-2007 for Guyana, which has guided adjustments to the BPB 2004-05 BPB and the development of the BPB 2006-07. The CCS took into consideration major national, regional, and international frameworks for national health development, including the Guyana National Health Plan 2003-07.

The national priorities for technical cooperation with PAHO/WHO are:

- . Establishment of policies, plans, and programs to achieve sustainable development through institutional strengthening, application of technical and scientific approaches, public participation, and use of the health settings approach;
- . Strengthening the Ministry of Health to carry out its steering role in health sector reform, including monitoring of the implementation of Essential Public Health Functions, strengthening of programs dealing with essential drugs and oral and eye health, and delivery of programs to the indigenous population and other vulnerable groups;
- . Development of plans, policies, and norms for priority diseases, including strengthening surveillance systems for non-communicable disease risk factors, communicable diseases, including HIV/AIDS, and animal diseases;
- . Strengthening the capacity of the Ministry of Health to reduce maternal mortality and morbidity by addressing quality of care issues, to establish safe and supportive environments, and to provide appropriate care for children and adolescents through extension of the Integrated Management of Childhood Illness (IMCI) and Integrated Care of Adolescents strategies; and
- . Sustaining the gains in addressing Vaccine Preventable Diseases and promoting greater equity in this issue in all the local Regions in Guyana.

PROJECTS

MANAGERIAL AND ADMINISTRATIVE PROCESSES

PURPOSE

International technical cooperation for health and a sound internal control framework in Guyana administered effectively.

EXPECTED RESULTS

- . Health priorities addressed through consensus building among national and international partners.
- . Mechanisms to ensure that information is shared on a timely basis with a wide range of counterparts established
- . MOH capacity to implement the National Health Plan and coordinate national and international co-operation enhanced.
- . PAHO's role as a lead international agency influencing policy and serving as a broker strengthened.
- . Enhanced support for the delivery of TC through the efficient and effective management of human resources of the WR.
- . Enhanced staff development programs in response to increased need for expertise in respective areas of work.
- . Enhanced management of financial and other resources to maximize benefits and ensure the production of timely Fin report
- . Communication technologies implemented to strengthen information access and dissemination.

- . Use of information and communication systems strengthened.
- . Enhanced security based on MOSS requirements and preventive maintenance conducted by the PWR.

SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH

PURPOSE

To ensure effective incorporation of "sustainable development and environmental health" into national policies and actions, including political, scientific, legal and regulatory frameworks for the management of human environments.

EXPECTED RESULTS

- . Health promotion strategies implemented into health programs and programs addressing the determinants of health.
- . Developed capacity of the Ministries and other partner agencies to plan, implement and evaluate the HPS Program.
- . Developed capacity of the Ministry of Health and other partners for planning, implementing and evaluating healthy settings.
- . Capacity of partner Ministries and agencies in planning and implementing social mobilization strategies strengthened.
- . Effective management of Health Promotion/Settings sub program.
- . Contribution made to implementation of the National Environmental Health System and to achieve the MDG.
- . Increased conceptual and analytical capacity for environmental risk prevention and control.
- . Public aware and community participating on environmental and sustainable development practices.
- . Resource mobilization, Interagency projects and sub-regional networking on SDE to enhance the country policies on MDG.

HEALTH SYSTEMS AND SERVICES

PURPOSE

To execute programs that will strengthen the capacity of the ministry of health in performing Essential Public Health Functions.

EXPECTED RESULTS

- . The capacity of the Ministry of Health in quality assurance in essential health technologies and medicines strengthened
- . Service delivery based on PHC principles strengthened
- . Governance capacity and public health leadership role of the MOH strengthened
- . Equity oriented surveillance and monitoring systems strengthened
- . Effective management of the program achieved.
- . The capacity of the Ministry of Health strengthened to monitor health sector performance within the context of the MDGs.
- . Capacity of the Ministry of Health to evaluate their programs strengthened.

COMMUNICABLE DISEASES

PURPOSE

Capacity of the national authorities to control communicable diseases strengthened.

EXPECTED RESULTS

- . The national capacity for research on communicable diseases improved.
- . Epidemic alert and response strengthened nationally.

- . Technical support provided for national malaria program
- . Technical support provided to national tuberculosis program
- . Technical support shared with other partners for implementation of HIV/AIDS strategic plan.

NON-COMMUNICABLE DISEASE AND REDUCTION OF RISK FACTORS

PURPOSE

Capacity of the national authorities to control Non-Communicable Diseases strengthened.

EXPECTED RESULTS

- . Capacity of the Ministry of Health to undertake an integrated community NCD prevention program strengthened.
- . Capacity of the Ministry of Health to lead the process for behavior change for the prevention of NCDs strengthened.
- . Capacity of the Ministry of Health and other partners to undertake surveillance of NCDs strengthened.
- . Capacity of the Ministry of Health to develop cost-effective policies on management of NCDs strengthened.
- . Capacity of the Ministry of Health to reduce tobacco use strengthened.
- . Capacity of the Ministry of Health to improve the nutritional status of its population strengthened.
- . Collaboration between health and other sectors strengthened to prevent violence and promote road safety.
- . Capacity of the lead agencies to evaluate surveillance systems of violence and traffic injuries strengthened.
- . Capacity of the Ministry of Health to improve mental health of the population strengthened.

FAMILY AND COMMUNITY HEALTH

PURPOSE

Institutional capacity strengthened to implement holistic and integrated reproductive and perinatal health programs.

EXPECTED RESULTS

- . Maternal and neonatal health measures at national level strengthened.
- . Capacity of the MOH to undertake monitoring and surveillance of maternal and perinatal programs strengthened.
- . Capacity of the MOH to implement cost-effective interventions for reduction of under-5 mortality strengthened.
- . Capacity of the MOH to re-orient the health services in Sexual Reproductive Health, including male involvement, strengthened.
- . Capacity of the MOH to protect the population from vaccine-preventable diseases strengthened.

HAITI

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

As one of PAHO Key Countries, Haiti warrants close attention from PAHO/WHO. The chronic emergency situation combined with the current sociopolitical instability make Haiti particularly vulnerable in relation to socioeconomic determinants of health. Although planning may need to adapt to circumstances as they develop, PAHO/WHO will continue its cooperation to support Haiti in the following main areas: emergency humanitarian assistance and post-disaster rehabilitation; and technical cooperation for national health development, including the Interim Cooperation Framework (ICF).

Taking all these into account, national priorities for technical cooperation with PAHO/WHO are:

- Improving health services access (development and supporting the decentralization of the health system).
- Establishing policies, plans and programs to achieve sustainable development through institutional strengthening, and disseminating technical and scientific information.
- Strengthening coordination among partners in Health, and striving for donor harmonization to face the challenges posed by the Millennium Development Goals (MDGs).
- Strengthening the capacity of the Ministry of Health to reduce maternal mortality by addressing quality of care issues, establishing safe and supportive environments and providing appropriate care for children and adolescents.
- Strengthening management of environmental risks and water and sanitation.
- Developing plans, policies, and norms for prevention and control of priority diseases, including strengthening surveillance systems for communicable diseases.
- Strengthening health promotion.

PROJECTS

SUPPORT FOR DEVELOPMENT OF THE PERSONAL HEALTH CARE

PURPOSE EXPECTED RESULTS

To help improve access to public health services for the poorest populations.

- National health system development policies and strategies applied in the country.
- A package of free medical services, including drugs and inputs for the care of pregnant women and newborns, defined and established in public health institutions in the Département du Sud.
- Medical care for children under 5 guaranteed in the Département du Sud.
- Information system in operation in the Département du Sud.
- Access to essential drugs and supplies in public health institutions improved.
- Medical care in general and emergency care in disasters improved.

PROGRAM DEVELOPMENT, ADMINISTRATION, AND COORDINATION

PURPOSE EXPECTED RESULTS

Program development, administration, and coordination

- Response capacity to meet the objectives in the priority areas of the Representative Office.
- By the end of 2007 working conditions and the material and technological capacity of the Office will be at a level to support the ideal delivery of technical cooperation.

- Development of extrabudgetary project management and support for the coordination of partnerships in health.
- Health information and communication of the Representative Office improved.
- Dissemination of scientific and technical information in health improved.

SUPPORT FOR DEVELOPMENT OF THE SYSTEM FOR MANAGING ENVIRONMENTAL RISKS TO PUBLIC HEALTH (GRES).

PURPOSE

Contribute to effective integration of the concept of sustainable development in national and local policies, programs, and projects in water supply and basic sanitation, vector control, and health promotion.

EXPECTED RESULTS

- Institutional capacity: Intervention capacity of public and private institutions involved in the GRES strengthened.
- Community capacity: Community capacity to identify and control environmental risks and promote health strengthened.
- Interventions: Environmental health interventions strengthened.
- Coverage of needs: Improved coverage of needs in the areas of drinking water and basic sanitation in marginal urban and rural areas.
- Advocacy: Advocacy undertaken to integrate the concept of gender equity in all policies, programs, and sustainable development projects.
- Lifestyles: Promotion of healthy lifestyles strengthened at the national level, with priority given to selected UCS.
- Partnerships: National, regional, and international alliances and partnerships in drinking water and basic sanitation, healthy settings, chemical substances and pesticides, healthy habitats, and health promotion established.

SUPPORT FOR COMMUNICABLE DISEASE PREVENTION AND CONTROL

PURPOSE

Contribute to reduction of the communicable disease burden in the poorest populations.

EXPECTED RESULTS

- Epidemiological surveillance system for communicable diseases strengthened.
- Increased vaccination protection for children and women.
- Prevention and control of priority communicable diseases (notably HIV/AIDS, TB, and malaria) strengthened.
- Plan of action for disasters in place: The necessary elements for managing communicable diseases in natural disasters and emergencies are planned in advance and the response is both rapid and adequate.

HONDURAS

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Throughout the 1990s, Honduras, which qualifies under the Highly-Indebted Poor Countries (HIPC) Initiative, has been promoting an ambitious strategy to stabilize its economy and break a long cycle of poverty and inequality. It recently achieved compliance with the terms of the improved initiative for debt reduction, resulting in a significant alleviation of its bilateral and multilateral foreign debt. This historical milestone represents an enormous challenge in terms of maintaining sound policies to ensure sustained economic growth and greater social progress. These resources will be channeled to key social programs within the framework of the Economic Recovery Program (ERP). Moreover, the health sector faces the challenge of mobilizing a significant proportion of these resources for its vast needs.

The current administration (2002-2006) opted to gear government management of the health sector toward long-term programs with a sector-wide approach (SWAp). Accordingly, it has adopted: the Health Sector Policy Framework, the Government Plan for the Health Sector 2002-02006, and the Strategic Plan for the Honduran Health Sector through 2021, all of which are consistent with the MDGs. Within this framework, the basic objective is to reduce maternal-child morbidity, mortality and malnutrition. PAHO/WHO has designated Honduras as a priority country and development of the Country Cooperation Strategy (CCS) 2006-2010 is under way, which will serve as the framework for adjusting the 2006-2007 Biennial Program Budget.

National priorities for PAHO/WHO Technical Cooperation are as follows:

- Develop the primary health care strategy in order to reduce infant mortality, maternal mortality, and malnutrition, with a view to expanding coverage of quality services and social participation in impoverished rural and urban areas.
- Develop and implement sectoral policies and strategies consistent with the Economic Recovery Program (ERP) and MDGs.
- Redefine and strengthen the roles of the Ministry of Health, especially its steering and regulatory functions.
- Intensify decentralization and departmentalization efforts, with a view to building management capacity at the local level and promoting human resources development.
- Strengthen the strategic partnership between the Ministry of Health and the Honduran Social Security Institute, with a view to ensuring coverage of the poorer sectors.
- Foster political dialogue and institutional technical capacity to address the social and environmental determinants of health within a coordinated intra- and intersectoral framework.
- Develop partnerships to strengthen priority programs, including programs to prevent, control, and eliminate communicable and noncommunicable diseases, and thus enhance the protection of family and community health.
- Promote actions aimed at reducing vulnerability to disasters and mitigating their effects.
- Strengthen national capacity to follow, monitor, and evaluate the health situation and its determinants, as well as strategic plans to prevent and control emerging and non-emerging diseases, including noncommunicable and chronic diseases.

PROJECTS

MANAGEMENT ACTIVITIES OF THE REPRESENTATIVE OFFICE

PURPOSE

Develop and maintain adequate organizational conditions for implementing technical cooperation efficiently and effectively in keeping with institutional standards and procedures.

EXPECTED RESULTS

- . The Representative Office will carry out management, technical, and political processes in a coordinated fashion
- . Strengthening International Technical Cooperation: Coordination of international technical cooperation will have improved among the different participating agencies, especially the agencies of the United Nations system

ENVIRONMENTAL HEALTH AND SUSTAINABLE DEVELOPMENT**PURPOSE**

Strengthen national capacity to identify, manage, and solve problems in environmental health and sustainable development that affect the health and quality of life of the population, with emphasis on the most vulnerable groups, employing the healthy settings strategy.

EXPECTED RESULTS

- . Basic Sanitation: Development of system for control and surveillance of water quality and other sanitation components will have been supported, with emphasis on areas with high maternal and child morbidity and mortality
- . Environmental Surveillance: National capacity to characterize, monitor, and control environmental problems that affect health, the quality of life, and sustainable development, including problems related to occupational health and the reduction of vulnerability, will have been strengthened
- . Social Participation: Processes for strengthening institutions with functions in the areas of basic sanitation, environmental quality, and sectoral and intersectoral networks related to health, environment, and sustainable development, will have been supported
- . Emergency and Disasters: The capacity of municipal, local, and civil society organizations will have been strengthened through greater use of methodologies, guidelines, and standards for the integrated management of environmental risks
- . Malaria Control without the Use of DDT: It will have been demonstrated that the methods used in selected municipios of the Atlantic area for malaria control without DDT and other persistent pesticides are replicable, cost-effective, and sustainable, thus preventing the introduction of DDT in the country

STRATEGIC HEALTH DEVELOPMENT AND HEALTH SERVICES**PURPOSE**

The National Health Authority will have been strengthened in terms of its steering role in the health sector, spearheading actions that increase social protection in health and facilitate access to high-quality, financially sustainable health services.

EXPECTED RESULTS

- . Regulation: The legal and regulatory framework that facilitates the regulatory function of the National Health Authority will have been strengthened
- . Services Network: The Ministry of Health will have been restructured for better coordination of functions and the health services network
- . Extension of Social Protection: Social Protection in Health will have been extended, increasing coverage and access to services with equity, quality, and sustainability, targeting the excluded population on a priority basis, with special emphasis on women of childbearing age and children
- . Human Resources: Human resources management and performance in the health services will have been strengthened
- . Essential Drugs: Timely equitable access to safe, quality essential drugs, blood, and health technologies will have been strengthened through further modernization of health regulations and improvements in the supply system for the services network
- . Gender Approach: Mainstreaming of the gender approach in health sector reform will have been strengthened in keeping with health priorities and the Millennium Development Goals
- . Information and knowledge management: National capacity to process and disseminate scientific and technical health information will have been strengthened, so that it can be used in the planning,

implementation, and evaluation of health policies, programs, and cooperation

- Sexual and Reproductive Health and Reduction in Maternal Mortality: The sexual and reproductive health of the Honduran population will have been improved, with emphasis on reducing maternal mortality by increasing skilled care in pregnancy, childbirth, and the post-partum period, and on the prevention of unwanted pregnancies in adolescents, within the framework of the national initiative for the reduction of maternal mortality and mortality in children under 5

HEALTH PROMOTION AND PROTECTION AND NUTRITION AND FOOD SECURITY

PURPOSE

Support national initiatives to reduce malnutrition.

EXPECTED RESULTS

- Regulation and Legal Framework. The capacity of the Ministry of Health to regulate and formulate a legal framework in food and nutrition, with a comprehensive intersectoral approach, will have increased
- Comprehensive Nutrition Approach: The capacity of the Ministry of Health to forge strategic partnerships for a comprehensive approach and technology transfer in food and nutrition, within the Healthy Municipios and Communities framework, will have increased
- Food and Nutrition Surveillance System: The intersectoral FNSS will have been developed at the national and municipal levels
- Institutional Management: The capacity of the Ministry of Health, Ministry of Education, and NGOs working in health promotion for the creation of healthy spaces will have increased

DISEASE PREVENTION AND CONTROL

PURPOSE

Reduce the incidence of prevalent communicable and noncommunicable diseases, prioritizing higher-risk geographical areas and more vulnerable groups (women, children under 5, and indigenous populations).

EXPECTED RESULTS

- Social and Gender Violence: Strategies for reducing social and gender violence will have been strengthened in priority areas and among priority groups
- Epidemiology and Health Surveillance: The capacity for analysis, research, evaluation, and planning of disease prevention and control interventions will have been strengthened in agencies responsible for health surveillance
- Prevention and Control of Emerging and Reemerging Communicable Diseases: National capacity for follow-up, surveillance, and evaluation of strategic plans for emerging and reemerging and non-communicable disease prevention and control, including vaccine-preventable and chronic non-communicable diseases, will have been strengthened

JAMAICA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Despite a recovery in gross domestic product since 2001 after five consecutive years of decline, Jamaica continues to face challenges to long-term growth, such as high levels of crime and violence, high interest rates, high cost of the public sector, vulnerability in foreign currency earning sectors such as tourism, and relatively low productivity. The country has several frameworks for national health development, has made health promotion the centerpiece of its health interventions, and has established a National Health Fund to assist persons with the cost of selected medications, especially those related to chronic diseases.

The national priorities for technical cooperation with PAHO/WHO are:

- Strengthening health promotion policies and programs, including those for control of non communicable diseases, mental disorders, substance abuse, and intentional and unintentional injuries;
- Increasing national capacity to prevent and control diseases, including the most prevalent communicable diseases, such as HIV/AIDS/STIs, with improvements in surveillance systems;
- Maintaining gains in Vaccine Preventable Diseases;
- Strengthening national health information systems, including vital statistics;
- Strengthening the National Public Health Laboratory;
- Improving maternal mortality surveillance, the Safe Motherhood program, and addressing reproductive health issues in adolescents;
- Implementation of the national essential health research agenda;
- Reduction of environmental risks, especially pertaining to children and workers;
- Strengthening disaster mitigation programs, including those pertaining to water and sanitation, with improved coordination for disaster relief.

PROJECTS

PROMOTION OF HEALTH AND DISEASE PREVENTION AND CONTROL

PURPOSE

To strengthen national capacity for the prevention and control of diseases.

EXPECTED RESULTS

- Capacity strengthened at national and local levels for the development, planning, and implementation of multisectoral health promotion policies and programs.
- Effectiveness of health promotion reviewed and results utilized to guide decision making.
- Capacity strengthened at national and local levels for control of communicable diseases (CDs).

HEALTH SYSTEMS AND SERVICES

PURPOSE

To strengthen the role of the MOH in the performance of EPHF.

EXPECTED RESULTS

- National capacity strengthened for the development, planning, and implementation of health systems.
- National capacity strengthened for the development, planning, and implementation of health services.
- Implementation of a comprehensive family health program strengthened.
- Health information system (HIS) strengthened and operational research conducted to guide decision making.

COORDINATION OF PROGRAM SUPPORT (OFFICE MANAGEMENT)

- PURPOSE** To ensure greater efficiency and effectiveness in the delivery of technical cooperation to the Ministries of Health in Jamaica, the Cayman Islands, Bermuda and other stakeholders.
- EXPECTED RESULTS**
- . Planning, coordinating, monitoring, and evaluating systems established for technical cooperation programs for Jamaica, Bermuda and Cayman.
 - . Capacity strengthened for the planning and implementation of technical cooperation programs for Jamaica, Cayman, and Bermuda.
 - . Safety and security of PAHO/WHO Representation and staff strengthened.

ENVIRONMENTAL HEALTH AND DISASTER MANAGEMENT

- PURPOSE** To ensure effective incorporation of public health issues into national policies and programs for environmental health.
- EXPECTED RESULTS**
- . National capacity strengthened for the management of the environmental health program.
 - . Environmental health concerns of vulnerable population groups addressed through effective partnerships and networks of centers of excellence.
 - . Environmental conditions that affect health assessed.

MEXICO

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

With a population of over 105 million, 24% of whom live in rural areas, Mexico is considered a high-income country. Mexico has the largest number of indigenous people in the Americas and its social, economic, educational, and health indicators reveal considerable differences between the figures for the indigenous population and national averages. The health services system and access to care are segmented. The national health profile is diverse. Mexico enjoys recognition and broad international visibility. The national health institutions are a relevant part of this picture and are frequently involved in programs and activities for collaboration, technology transfer, and donations.

In Mexico a Country Cooperation Strategy (CCS) exercise was conducted in 2004 that resulted in recommendations to divide PAHO/WHO technical cooperation with the country into five strategic areas:

1. Inequalities in health: poverty, gender, and ethnicity
2. Healthy settings
3. Borders, migration, and globalization
4. Family and community health
5. The steering role, quality, and performance of the health system.

The following priorities and strategies outlined in the 2001-2006 National Health Program for the health sector will be supported by PAHO/WHO:

- . Link health with economic and social development
- . Reduce health lags that affect the poorest groups
- . Confront emerging problems by explicitly setting priorities
- . Deploy a campaign for quality in the health services
- . Provide financial protection in health to the entire population
- . Construct a cooperative federalism in health
- . Strengthen the steering role of the Secretariat of Health
- . Move toward an integrated health care model
- . Expand citizen participation and freedom of choice in primary care
- . Strengthen health investment in the areas of human resources, research, and infrastructure.

PROJECTS

MANAGEMENT OF THE REPRESENTATIVE OFFICE

PURPOSE

Apply results-based management practices to support the implementation of technical cooperation programs in the country.

EXPECTED RESULTS

- . Response capacity will have been renewed in response to the recommendations of the CCS exercise conducted in Mexico in 2004.
- . Resources allocated for the operation of the Representative Office will have been managed effectively.
- . PALTEX Mexico will have developed work plans for 2006-2007 based on the needs of the country and the requirements of Headquarters in Washington, DC.

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE Consolidate critical and proactive spaces for technical cooperation that strengthen national health policies within the framework of the PAHO/WHO priorities, lines of action, and work approaches defined in the 2004-2009 ECP/CCS.

EXPECTED RESULTS

- Technical cooperation in health between Mexico and other Latin American and Caribbean countries will have been strengthened and expanded
- Management of TC: PAHO/WHO technical cooperation with the authorities of the SSA in its capacity as the steering entity of the health system will have been programmed and evaluated.
- Development of PWR: The internal capacity of the Representative Office for implementing the TC strategy for the biennium and the changes envisaged in the 2004-2009 ECP/CCS will have been improved.

INEQUALITIES IN HEALTH

PURPOSE Reduce health gaps that disproportionately affect the poor and indigenous peoples, as well as those due to gender differences.

EXPECTED RESULTS

- Indigenous peoples: A contribution will have made to improve the health of indigenous peoples through networks and partnerships among national institutions, civil society, and international organizations.
- Social protection in health: National and state-level strategies for improving access to health services for populations lagging behind will have been supported.
- Gender and health: Information useful for providing evidence of gender inequalities in health will have been disseminated, promoting the implementation of integrated strategies among public institutions, civil society, and TC for reducing the inequalities.
- Infectious diseases: International exchanges of knowledge, models, and strategies for communicable disease prevention and control will have been promoted and expanded.
- Immunization: A contribution will have been made to the implementation of national vaccination policies and strategies, linking them to regional and global initiatives.
- STI-AIDS: Promotion and advocacy campaigns that buttress national policies and strategies to fight HIV/AIDS and STI will have been carried out.

HEALTHY SEATTINGS

PURPOSE Contribute to the development of policies aimed at achievement of settings that are healthy, safe, and protected against the threats of social and health risk factors.

EXPECTED RESULTS

- Environmental risks: Strategic partnerships of diverse institutions and organizations linked to prevention and protection against environmental risks will have been promoted.
- Food safety: Collaboration will have taken place in formulating and implementing regulations, standards, and practices in food safety that buttress national regulatory policy.
- Nutrition and food security: Support will have been provided for the articulation of intersectoral actions through the consolidation of a nutrition surveillance system.

Healthy Communities: Collaboration will have taken place with the Healthy Municipios Network for the promotion and evaluation of community projects aimed at the adoption of healthy lifestyles.

GLOBALIZATION

PURPOSE Launch strategies for prevention and control of health risks resulting from the rapid increase in internal and cross-border movement of goods, services, and people.

EXPECTED RESULTS

- Southern border: The institutional capacity of the southern border states for situation analysis and the organization of responses to priority health issues will have been strengthened, with emphasis on communicable diseases and health services coverage.
- Migration: Evidence will have been generated and disseminated on the link between migratory movements and health.
- Globalization: Knowledge will have been generated and disseminated on the implications of globalization for the health sector, with special emphasis on the need to develop legislation and harmonize health regulations.

FAMILY AND COMMUNITY HEALTH**PURPOSE**

Promote a family- and community-based approach to prevention and health care for priority problems.

EXPECTED RESULTS

- Life cycle: Knowledge and application of methodologies, models, and technologies for the care of children, adolescents, and older adults will have been prioritized, facilitating a sociosanitary approach to their problems.
- Mental health: Collaboration will have taken place in the preparation of plans, policies, and programs linked to psychiatric reform in the country.
- Alcohol and addictions: Knowledge and scientific evidence will have been generated in the country on addictions, particularly to alcohol, and the awareness of personnel about the need for an integrated approach to these problems will have been increased.
- Violence: Partnerships and networks for raising awareness, knowledge production, and the development of interventions aimed at reducing domestic violence and injuries will have been promoted and gained adherence among public and private TC institutions and organizations.

PURPOSE
EXPECTED
RESULTS

PURPOSE
EXPECTED
RESULTS

NORTHERN CARIBBEAN

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The Cayman Islands and Bermuda are two of the internally self-governing United Kingdom Overseas Territories (UKOTs) in the Caribbean, and are served through the PAHO/WHO office in Jamaica. The Cayman Islands have a National Strategic Plan for Health that highlights public and private sector collaboration, while Bermuda has been undertaking health sector reform, particularly in areas related to program and health services delivery.

PAHO/WHO technical cooperation will provide support mainly in the areas of training and direct technical assistance addressing the following areas:

- . In the Cayman Islands, epidemiology, disaster mitigation, environmental health, community health nursing, chronic diseases, health promotion, immunization, injury surveillance, dental health, cancer, and rodent control, and
- . In Bermuda – epidemiological surveillance and quality assurance.

PROJECTS

CAYMAN ISLANDS – HEALTH SYSTEMS AND SERVICES DEVELOPMENT

PURPOSE

To strengthen the capacity of the Ministry of Health to manage its human, physical, and financial resources effectively.

EXPECTED RESULTS

- . Skills of health workers improved through training in areas such as epidemiology, disaster mitigation, community health nursing, chronic diseases such as diabetes, health promotion, and lifestyle disease prevention and control.
- . Epidemiological surveillance strengthened.
- . Health care delivery strengthened by technical cooperation visits.

BERMUDA – HEALTH SYSTEMS AND SERVICES DEVELOPMENT

PURPOSE

To strengthen epidemiological surveillance and quality assurance in the delivery of health care in Bermuda.

EXPECTED RESULTS

- . Capacity for delivery of health services enhanced in the areas of epidemiology and quality assurance through training of health staff in these areas.

NETHERLANDS ANTILLES/ARUBA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The Netherlands Antilles (Curacao, Bonaire, Saba, San Eustatius and San Martin) constitute an autonomous territory within the kingdom of the Netherlands. They are responsible for their own administration and political affairs. PAHO/WHO technical cooperation with the Netherlands Antilles is implemented through the country office of Venezuela. A Country Cooperation Strategy is scheduled for Venezuela, including the cooperation with the Netherlands Antilles in the second semester of 2005.

The national priorities for technical cooperation with PAHO/WHO are:

- . Strengthening the steering role of the Ministry of Health, based on national and PSB strategic Plan throughout the Essential Public Health Functions implementation.
- . Strengthening national capacity to develop Policies and Institutional Capacity for Planning and Management in Public Health.
- . Strengthening national capacity to achieve results in health promotion.
- . Strengthening national capacity to evaluate and promote equitable access to necessary health services.
- . Definition of Human Resources Development Policies and training in public health.
- . Development of policies and national research in Health Agenda.
- . Strengthening national capacity to achieve results in minimizing the impact of emergencies and disasters on public health.

PROJECTS

HEALTH IN NETHERLANDS ANTILLES

PURPOSE

To strength the steering role of the MOH, based on National and PSB Strategic Plan throughout the Essential Public Health Functions implementation, at the islands level.

EXPECTED RESULTS

- . Islands and national capacity for monitoring, evaluating and analysis of health status strengthened.
- . The national capacity for achievement of results and key processes (performance) in public health, surveillance, research, control of risks and threats to public health has been improved.
- . The national capacity for achievement of results and key processes (performance) in health promotion has been improved.
- . The national capacity for achievement of results and key processes (performance) in social participation in health has been improved.
- . National capacity for development of Policies and Institutional Capacity for Planning and Management in Public Health strengthened.
- . The national capacity for achievement of results and key processes (performance) in strengthening of institutional capacity for regulation and enforcement in public health has been improved.
- . National capacity for the evaluation and promotion of equitable access to necessary health services strengthened
- . The national capacity for defining Human Resources Development Policies and training in Public Health has been improved.

- . National capacity for ensuring the quality of personal and population-based health services strengthened.
- . The national capacity to develop policies and a national research development in Health agenda has been improved
- . The national capacity for achievement of results and key processes (performance) in minimizing the impact of emergencies and disasters on public health has been improved.

HEALTH IN ARUBA

PURPOSE

To strengthen the steering role of the MOH, based on National Strategic Plan, PSB Strategic Plan and the Essential Public Health Functions implementation.

EXPECTED RESULTS

- . The monitoring, evaluation, and analysis of health status EPHF # 1 strengthened.
- . The public health surveillance, research, control of risks and threats to public health has been improved.
- . The health promotion has been improved.
- . The social participation in health has been improved.
- . National capacity for development of Policies and Institutional Capacity for Planning and Management in Public Health strengthened.
- . The strengthening of institutional capacity for regulation and enforcement in public health has been improved.
- . National capacity for the evaluation and promotion of equitable access to necessary health services strengthened
- . The human resources development and training in public health has been improved.
- . National capacity for ensuring the quality of personal and population-based health services strengthened.
- . The research in public health has been improved.
- . The minimizing the impact of emergencies and disasters on public health has been improved.

NICARAGUA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Nicaragua is seriously behind in terms of social progress and exhibits deep disparities. In 2004, the country qualified for assistance under the Highly-Indebted Poor Countries (HIPC) Initiative, and channeled resources obtained from this cancellation of foreign debts to the social priorities set out in the ERCER. However, the estimated allocations earmarked for the health sector are disproportionate in terms of the sector's vast and growing needs. During 2004, considerable progress was made under the sector's policy and health plan. In May, the 2004-2015 National Health Policy was approved, and in September the National Health Plan 2004-2015 was launched as an instrument to guide the implementation of the policy, whose primary purpose is to guarantee the right to health and equitable, universal access to a set of basic health services, with a view to improving life expectancy and the quality of life of the population. Moreover, PAHO/WHO has designated Nicaragua as priority country and developed the Country Cooperation Strategy (CCS) 2004-2008, which serve as a framework for developing the 2006-2007 PBP. The issue of the harmonization and alignment of cooperation and use of the sector-wide approach (SWAp) in Nicaragua merit special attention in view of the accelerated time frame imposed, both by the government and bilateral cooperation, including the financing agencies (World Bank and IDB).

National Priorities for PAHO/WHO Technical Cooperation:

- Strengthen the comprehensive health care model (PHC) as the linchpin of health policy coordination, with a view to a balanced integration of the basic work of promotion, prevention, recovery, and rehabilitation with the performance of the essential public health functions.
- Develop a national health promotion policy, program, and plan, promote healthy spaces (i.e., *municipios*, schools, workplaces, and neighborhoods), and enhance local capacity in the areas of disaster preparedness, mitigation, and response.
- Strengthen institutional capacity to expand health service coverage and quality, exercise the steering role, and develop sectoral policies.
- Strengthen the capacity to produce and analyze data on health inequities and exclusion, with a view to facilitating the essential social dialogue that leads to consensus-building on alternatives for reducing and mitigating such disparities.
- Increase institutional capacity within the Ministry of Health (MINSAL) to oversee mechanisms that will make it possible to increase per capita investment in health.
- Promote intersectoral measures designed to reduce the risks associated with internal and external migration, especially in the future context of the national development plan: halt and roll back the growing tide of environmental degradation, particularly in rural areas, and actively promote the healthy spaces strategy.
- Strengthen institutional and sectoral capacity to reduce vulnerability to mitigate the effects of natural disasters.

PROJECTS

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

Contribute to health development in Nicaragua within the framework of PAHO/WHO strategic planning in the Region and the Millennium Development Goals.

EXPECTED RESULTS

- NHD: Effective coordination of the technical cooperation program will have been established
- TCC: Technical cooperation among countries will have been strengthened

- . RKS/HST: National, local, and PAHO capacities in health intelligence and knowledge management will have been strengthened
- . EHA: Actions for emergency and humanitarian assistance in the country will have been improved
- . Humanitarian assistance actions will have been coordinated with the United Nations system through DMT and the UNETE group

DISEASE PREVENTION AND CONTROL

PURPOSE

Strengthen national capacities to implement comprehensive intersectoral actions for prevention, surveillance, and control of communicable and noncommunicable diseases, within the framework of the MDGs, the National Health Plan, and national health policies.

EXPECTED RESULTS

- . Administrative management of the delivery of technical cooperation to the country within the PAHO//WHO framework will have been assured
- . Local capacities for prevention, control, and investigations of communicable diseases will have been strengthened
- . National capacity for alert and response to disease outbreaks with epidemic potential will have been strengthened
- . The strategy for prevention and control of malaria will have been strengthened, with particular emphasis on indigenous population areas
- . TED: Coverage of DOTS/TAES will have been expanded in hard-to-reach areas for the health services and in vulnerable populations
- . National capacity for prevention and control of NCDs, with emphasis on diabetes, cardiovascular disease, and cervical cancer will have been strengthened

SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH

PURPOSE

Strengthen capacities in the Ministry of Health for analysis, dialogue, multisectoral coordination, citizen participation, strategic partnerships, and the institutional steering role, in order to take comprehensive action in the areas of health, environment, and nutrition for vulnerable populations and priority groups.

EXPECTED RESULTS

- . HHS: The role of the Ministry of Health in implementation of the national development plan and ERCERP II will have been strengthened
- . ERA: The capacity for evaluation and management of environmental risks will have been strengthened
- . HSC: The health promotion strategy will have been strengthened at all levels of the Ministry of Health
- . PHE: Capacities for improvement in environmental quality, safe water, sanitation, and solid waste will have been strengthened
- . INCAP: National and local capacities for action in food and nutrition security will have been strengthened as the linchpin of sustainable human development and the fight against poverty

FAMILY AND COMMUNITY HEALTH

PURPOSE

Intensify actions for intersectoral and interagency health development in the health sector, by strengthening PHC and knowledge management, incorporating the Millennium Development Goals and national priorities into family and community health for families and communities suffering greater exclusion by reason of geography, gender, ethnicity, socioeconomic status, or age.

EXPECTED RESULTS

- . WMH: Technical and managerial capacities will have been strengthened for reducing inequities in sexual and reproductive health and for contributing to the reduction of maternal mortality through Safe Motherhood
- . CAH: Technical and managerial capacities will have been strengthened for reducing gaps in the health status of children and adolescents and for reaching the goals set by the Millennium Summit and the ERCERP
- . HIV: Technical capacities will have been strengthened for development of a comprehensive strategy to combat HIV/AIDS, combining prevention, treatment, care, and support for HIV+ people
- . VID: Eradication/elimination of Vaccine-Preventable Diseases (VPD) will have been consolidated to help attain the Millennium Development Goals in all departments of the country, with priority given to excluded municipios and population groups (the extremely poor, rural areas, ethnic groups, hard-to-reach areas, Autonomous Regions, border municipios, etc.), in keeping with the policies, plans, and strategies of the PNS and in coordination with the different actors involved
- . FOS: The Ministry of Health will have been strengthened for implementation of the National Plan for Food Safety, with the participation of the sectors and actors involved in health promotion and consumer protection, and with particular attention to vulnerable groups, through a quality assurance system for the consumption of food that is wholesome and of high nutritional value
- . NUT: Intersectoral capacities for action in the reduction of chronic malnutrition will have been strengthened, particularly in poor rural communities, through consensus-building, training, adequate use of information, and the mobilization of national and external resources
- . WMH: The Gender Approach will have been integrated into health sector reform and in the country Cooperation Office, in order to reduce gender inequities in health in populations with higher levels of social exclusion, thereby contributing to the attainment of Millennium Goal No. 3
- . MNH: Mental Primary Health Care will have been strengthened in at-risk families and groups by addressing the causes, generating information, and developing community strategies for dealing with problems generated by the abuse of psychotropic substances and suicidal behavior
- . The capacities of the Ministry of Health and key actors for generating scientific evidence will have been strengthened, as will their capacity for action to generate information for the drafting of healthy intersectoral plans and public policies at the national and local levels that contribute to the reduction of violence and injuries in communities at greater risk with higher levels of social exclusion.

TECHNOLOGY AND HEALTH SERVICE DELIVERY**PURPOSE**

Strengthen application of the National Health Policy with the principles of universality, comprehensiveness, and equity.

EXPECTED RESULTS

- . PHI: The national health system will have been strengthened on the basis of the health policy, with emphasis on the management of health financing
- . HRH: The human resources development policy will have been implemented in the health sector
- . OSD: A comprehensive health services plan for improving the quality of care based on PHC will have been implemented
- . PHI: The steering role of the Ministry of Health will have been developed and consolidated, with emphasis on leadership
- . SPH: The national and local capacities of the Ministry of Health for effective implementation of health inclusion strategies will have been strengthened
- . EDV: Access to quality, low-cost essential and generic drugs will have been improved

- . CLT: Implementation of the National Blood Program and transfusion services will have been strengthened, with emphasis on volunteer donations
- . OSD: The National Comprehensive Rehabilitation Program will have strengthened a multisectoral approach, with particular attention to health promotion and prevention of disability
- . SPH: The healthy aging approach will have been integrated into national and local plans and programs in health and social protection

MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

PURPOSE

Guarantee effective administrative management and mechanisms to support the delivery of technical cooperation to the country.

EXPECTED RESULTS

CPS: Administrative management and basic maintenance for the delivery of technical cooperation to the country will have been assured within the PAHO/WHO framework

PANAMA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

- Panama is classified among the countries with a high Human Development Index (no.59 of 150), and its GDP is among the highest in the Region. During the 1990's, the country's economy grew at a steady pace, but it has slowed during the last three years. Panama's population enjoys some of the highest educational levels in the Region, on average, and good aggregate health indicators; however, these general conditions of well-being include profound inequalities. According to the Inter-American Development Bank, income distribution in Panama's economy, its political history, and the unequal distribution of wealth pose formidable challenges to economic and social development in the country. In light of its strategic geopolitical status, adequate use of its comparative advantages would present a great opportunity to reduce pockets of poverty, enhance development of its human capital, and achieve a more equitable society. Enhance development of its human capital, and achieve a more equitable society. Indigenous groups, accounting for approximately 10% of the total population, represent the most critical extreme of social exclusion. The 1999-2004 social agenda was geared to decentralization and social participation; however, these processes are still in their early stages. The recently elected government hopes to establish a comprehensive program to reform and modernize the National Health System, which, together with Panama's commitment to attaining the MDGs, has served as the framework for the formulation of the 2006-2007 BPB.
- National Priorities for PAHO/WHO Technical Cooperation:
 - Strengthen the leadership and steering role of the Ministry of Health.
 - Promote ongoing strategic analysis of the health situation and its determinants, develop national capacity to set priorities, and negotiate and evaluate health interventions, with emphasis on the search for equity.
 - Develop strategies for achieving the MDGs, assigning priority to expanding quality coverage of the indigenous population.
 - Develop partnerships with a view to strengthening priority program, including programs to prevent, control and eliminate communicable and non-communicable diseases, with a view to protecting family and community health.
 - Improve environmental health, with emphasis on basic sanitation and the strengthening of institutional capacity to facilitate the construction of healthy spaces.
 - Promote actions aimed at reducing vulnerability to disasters and mitigating their effects.

PROJECTS

SUPPORT FOR NATIONAL HEALTH DEVELOPMENT

PURPOSE

To support national health development and contribute to the reduction of existing inequalities and attainment of the Millennium Development Goals.

EXPECTED RESULTS

- Management, coordination, and implementation of the technical cooperation program: Coordination and implementation of the technical cooperation program, in order to strengthen national health development
- Technical and administrative capacity of the strengthened Representative Office in order to facilitate execution of the TC program: Technical and administrative capacity of the strengthened Representative Office in order to improve the technical cooperation response to the country
- Efficient response of the office to emerging health initiatives and new cooperation modalities: Efficient response of the office to Panama's emerging health initiatives and monitoring of subregional agreements, in particular, RESSCAD

- . Heightened PAHO/WHO presence in interagency forums of the SNU and other cooperation agencies
- . The national capacity for the design and implementation of TCC projects will have been strengthened
- . Ethnicity and Gender: The concepts of ethnicity and gender integrated into the different components of the work program carried out with national counterparts

MANAGEMENT AND COORDINATION OF THE COUNTRY PROGRAM

PURPOSE

To optimize and make the management of the technical cooperation program more efficient.

EXPECTED RESULTS

- . Implementation of the technical cooperation program: Technical cooperation program implemented efficiently with support from an effective administrative and logistical support platform
- . Human resources hired for effective management of the technical cooperation program

INFORMATION, COMMUNICATION, AND TECHNOLOGY

PURPOSE

To improve the national capacity for situation analysis and health status monitoring, with an emphasis on the search for equity in health.

EXPECTED RESULTS

- . National health information system: The national health information system will have been strengthened by reinforcing the registry systems, information analysis, and their use in decision-making; moreover, both training and research on inequalities in health will have been fostered
- . Strategy to improve the dissemination of public information and communicating for health strengthened
- . Strengthening of specialized information and communication platforms and sites
- . Strategy in place to strengthen the use of specialized information and communicating for health platforms and sites, including VHL

SUSTAINABLE DEVELOPMENT AND ENVIRONMENTAL HEALTH

PURPOSE

To facilitate the application of intersectoral approaches that focus on the relationship between sustainable development, human security, and environmental health.

EXPECTED RESULTS

- . Prevention of environmental risks: Strengthened institutional capacity so that health surveillance is carried out to prevent environmental risks through the adoption of regulations, laws, and standards
- . Healthy Spaces: Urban and rural communities trained to design, plan, and evaluate the application of the Healthy Spaces strategy as a key factor in the improvement and sustainability of the population's health status
- . Drinking Water and Sanitation: There is a strategy agreed to by consensus among the actors in the drinking water and national sanitation subsector to increase national water and sanitation coverage as a basic element of public health
- . DDT Project: Prevent the use of the DDT for malaria control
- . Emergencies and Disasters: The health sector of Panama will have strengthened national and local capacities in emergency and disaster preparedness, mitigation, and response

FAMILY AND COMMUNITY HEALTH

PURPOSE

To strengthen the national response capacity of the health sector through technical cooperation with families and the community at the core.

EXPECTED RESULTS

- . Maternal and Child Health: National plans for maternal and child health designed and implemented in response to the MDGs

- . Comprehensive Adolescent Health: National Comprehensive Adolescent Health Plan , with an intersectoral approach, designed and implemented
- . Mental Health, Violence, and Tobacco: Strengthened Mental Health and Substance Abuse Program, prevention and violence control actions, as well as implementation of the Framework Convention on Tobacco Control (FCTC)
- . Promotion of Health, Nutrition, and Food Security: Strengthened health promotion strategies and actions, as well as a strengthened Nutrition and Food Security Policy and Plan (NUT), at the national and local levels, with a participatory, interdisciplinary, and multisectoral vision
- . Local Development: support and coordination for strengthening interdisciplinary and intersectoral local development initiatives

HEALTH SERVICES MANAGEMENT

PURPOSE

To facilitate the development of Primary Health Care as the basic strategy for strengthening health care networks serving the population.

EXPECTED RESULTS

- . Promotion of managerial capacity in the National Health System: Strengthened management model for administrating the health system in a decentralized, participatory, and integrated fashion
- . Definition of an Integrated Care Model: Definition of an integrated care model based on the Primary Health Care Strategy, with a focus on achieving the Millennium Development Goals
- . Institutionalization of a national process for developing HR for health
- . A Strengthened National Drug Policy
- . Systematization of health technology use by level of complexity
- . Strengthening of National Policy on Health Infrastructure and investments in health infrastructure

DISEASE PREVENTION AND CONTROL

PURPOSE

To strengthen the general epidemiological capacity of the country to guarantee that effective prevention and control measures are taken to reduce morbidity and mortality from communicable and non-communicable diseases and other health impairments, with special attention to vulnerable populations.

EXPECTED RESULTS

- . Developing Epidemiology: national plan for developing epidemiology prepared and in place
- . Communicable Diseases: The national capacity to detect, report, investigate, and provide a comprehensive response for the prevention and control of cases and outbreaks of communicable diseases will have been strengthened
- . Non-communicable Diseases: The application of an integrated approach to formulate policies, strategies, and effective local models for the prevention and control of non-communicable disease and risk factors will have been strengthened
- . Expanded Program on Immunization: The application of an integrated approach with intersectoral participation will have been strengthened to improve the effectiveness, efficiency, and socioeconomic evaluation of the EPI
- . Dengue: National authorities will have been strengthened so that they may implement the integrated strategy for dengue prevention and control, based on Resolutions CD43.R4 and CD44.R9, approved in 2001 and 2002
- . Veterinary Public Health: The national response capacity will have been strengthened to boost the response capacity so as to favor comprehensive interventions coordinated jointly by the Ministry of Health (MINSa) and Ministry of Environmental Development (MIDA), with emphasis on food safety, prevention and control of zoonosis of importance for public health, FBDs, and foot-and-mouth disease

- . Health Surveillance System. The health surveillance system will have been strengthened

PARAGUAY

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The sector's main problems include high levels of poverty; inequitable access to health services due to physical, functional, cultural, and economic barriers; limited development of the health system and coordination of service networks; and the prevalence of preventable diseases. National health policy for 2003-2008 has been defined. This policy seeks to develop and strengthen the national health system through: the reorganization of services, integration of health care, improved steering capacity of the Ministry of Health, sectoral decentralization, health promotion, and financing. For cooperation with PAHO/WHO, there is an Office of International Cooperation in the Ministry of Health, which recently began operations. Moreover, there is a (MERCOSUR) Working Group to support the reform. Paraguay has exercised real subregional leadership in the areas of Chagas' disease and smoking prevention. The CCS is planned for the second semester of 2005.

The national priorities for PAHO/WHO cooperation are as follows:

- . Improve levels of maternal and child health.
- . Implement decentralization processes in the health sector.
- . Gradually obtain universal access to quality health services.
- . Strengthen the health services network, with emphasis on comprehensive health care for priority population groups, including the guarantee of a safe blood supply.
- . Develop the surveillance system for lifestyles and morbidity and mortality, and interventions in health promotion and disease prevention, with special emphasis on vaccination.
- . Develop the sectoral process for the planning, organization, management, and productivity of human resources.
- . Improve the capacity for health and environmental management.
- . Improve the capacity for negotiation and participation in regional and subregional integration entities (MERCOSUR) in aspects related to health.

PROJECTS

HANDLING, COORDINATION, AND MANAGEMENT OF TECHNICAL COOPERATION PROJECTS

PURPOSE

To strengthen the capacity of the PAHO/WHO Representative Office in Paraguay to respond in a timely, effective, and quality fashion to the country's technical cooperation needs and to contribute to the attainment of the Millennium Development Goals and fulfillment of the PAHO Strategic Plan 2003-2007 and the WHO 10th General Program of Work.

EXPECTED RESULTS

- . Coordination of Technical Cooperation: The PAHO/WHO Representative Office in Paraguay will have strengthened its capacity for situation analysis and the preparation of intervention proposals and improved its technical handling of the cooperation program
- . Internal Capacity: The PAHO/WHO Representative Office will have strengthened its internal organization and the capacity of its staff to respond more proactively and effectively to the demand for technical cooperation
- . Management: The quality of administrative processes will have improved in order to facilitate optimal development of the technical cooperation program for the country by the end of the biennium
- . Scientific and Technical Information: At the end of the biennium, access to scientific and technical

health information will have been increased in the country by strengthening and implementing the Virtual Library for Health and Environment, the Documentation Center, and PALTEX

- . Technical Cooperation among Countries: By the end of the biennium, at least four projects for technical cooperation among countries of the Region will have been formulated, agreed to, and executed

DEVELOPMENT OF THE NATIONAL HEALTH SYSTEM

PURPOSE

To strengthen health system organization through PHC, the model of care, and the network of services in order to respond to the national health problems outlined in the 2003-2008 policy; and to the commitments assumed in MERCOSUR (SGT1).

EXPECTED RESULTS

- . Steering Role: Strengthened steering role of the national health authority, with public health as the linchpin, in order to attain the Millennium Development Goals, and make good on the commitments assumed in MERCOSUR
- . Health Services: Comprehensive support for the organization and delivery of health services centered on PHC and consonant with the provisions of the 2003-2008 national health policy
- . HR Management: Strengthened HR management and performance in health services and the system
- . HR Policy: Strengthened human resources for health policy, nationally and regionally
- . Immunization: Competencies will have been strengthened at all levels of the health system to manage the immunization program so as to guarantee safe vaccination of the entire target population
- . Sexual and Reproductive Health: Competencies will have been strengthened at all levels of the health system to integrate promotion and prevention components into Sexual and Reproductive Health Care
- . Child and Adolescent Health: Competencies will have been strengthened at all levels of the health system to integrate the promotion and prevention components into Child and Adolescent Health Care

HEALTH MONITORING, PREVENTION, AND CONTROL OF PRIORITY HEALTH PROBLEMS

PURPOSE

To strengthen the national capacity in epidemiology, information systems, health risk and impairment assessment, surveillance and research, decision making and interventions in public health to contribute to the attainment of the MDGs and fulfillment of the PAHO Strategic Plan and the WHO 10th Program of Work.

EXPECTED RESULTS

- . Epidemiology, Information System, and Analysis: National capacity in epidemiology, information system, and analysis for decision making in health will have been strengthened
- . Rabies, Foot-and-Mouth Disease, and Food: Human and canine rabies will have been eliminated, the country will remain free of foot-and-mouth disease with vaccination, the control of other priority zoonoses will be stepped up, and the economic, social, and health damage from food contamination will have been reduced
- . Noncommunicable Diseases: A proposal for the promotion of healthy habits and the integrated prevention of noncommunicable diseases will have been consolidated under one department in the country
- . Vaccine-Preventable diseases: Competencies in the epidemiological surveillance of VPD will have been strengthened at all levels of the health system in order to monitor and assess the impact of vaccination on EPI target populations
- . DOTS/TAES, STD/HIV/AIDS, and Leprosy: The national capacity for defining policy and standards, planning, implementation, and evaluation of the DOTS/TAES strategy, STI/HIV/AIDS activities, and consolidation of leprosy in Paraguay will have been strengthened
- . Vectors: The national capacity to monitor, prevent, and control vector-borne diseases will have been

strengthened

- . Potentially Epidemic Diseases: The national capacity for surveillance, prevention, and control of potentially epidemic diseases will have been strengthened

IMPROVEMENT OF ENVIRONMENTAL HEALTH

PURPOSE

To strengthen national capacity in environmental health and in the consolidation of healthy settings, with an emphasis on priority areas and groups.

EXPECTED RESULTS

- . Chemical Safety: National and local capacity in the area of chemical safety will have been strengthened
- . Water Management and Sanitation Capacity: Managerial capacity in water and sanitation services will have been strengthened
- . Disasters: The national capacity for disaster prevention, response, and mitigation will have been strengthened
- . PEC: National strategies for community mobilization, promotion of healthy settings, PEC, institutional networks, and intersectoral coordination will have been strengthened
- . Intervention in Vulnerable Groups: Organization of the different social actors will have been supported for health interventions among priority human groups
- . Occupational Health: National capacity in occupational health will have been strengthened

PERU

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

Peru is a heterogeneous, multicultural nation with a vast supply of natural, mineral, hydrological, biological, and forest resources. There are significant differences and inequities in living conditions, risks to the population, and health options. Over half the population lives in poverty. In recent years, there has been sustained economic growth and a moderate economic growth trend has been forecast. In 2002 the basic provisions of the Decentralization Act were enacted, and in January 2003 the regional governments began operations. Peru has been in negotiations on NAFTA with the United States since 2004. The Sectoral Policy Guidelines (2002-2012) set the following priorities: promote health and prevent disease, ensure comprehensive health care by extending health insurance and providing universal insurance, promote human resources management and development policy, create a coordinated and decentralized national health system, reorganize the Ministry of Health and strengthen its role in sectoral management, new comprehensive health care model, rational use and supply of drugs, internal and external financing targeting the poorest sectors, democratization of health. International Cooperation in Health has increased in recent years, from both the agencies of the United Nations system and investments from reimbursable and nonreimbursable external resources. The country is the permanent headquarters of the Andean Community of Nations (CAN) and the Andean Health Agency (ORAS/CONHU). As of 2004, it has formed part of the Working Group on PAHO in the 21st Century. The CCS is planned for the first semester of 2006.

The national priorities for PAHO/WHO technical cooperation are as follows:

- . Contribution of health to equitable human development.
- . Support FOR national efforts to achieve the Millennium Goals and monitor the progress of these efforts.
- . Strengthening of the national, regional, and local health authorities.
- . Support for the health care decentralization process.
- . Intersectoral action to strengthen the culture of health.
- . Strengthen the alert and response capacity of both the health system and the population in the area of risks, threats, health determinants, and disaster relief.

PROJECTS

SUPPORT FOR THE DEVELOPMENT, MANAGEMENT, AND COORDINATION OF COUNTRY PPROGRAMS

PURPOSE

To improve the health status of the Peruvian population through the progress made by the coordinated and decentralized National Health System and the efficiency and impact of technical cooperation with the country.

EXPECTED RESULTS

- . Mobilization of political will regarding the MDGs: At the highest levels, nationally, internationally, and within civil society, political will will have been mobilized within the framework of the respective institutional mandates, in the interest of the country's commitment to attaining and monitoring progress with respect to the Millennium Development Goals
- . Social Communication in Health: The institutional image will have been improved, and the technical capacity of national, regional, and local authorities will have been strengthened in terms of communicating for health
- . Management of Knowledge in Health: A new model for managing knowledge in health will have been introduced that uses information technology to facilitate public access to information along with

the distribution of material for education, management, and improving the performance of human resources in the public sector and for technical cooperation

- . Management and Optimization of Technical Cooperation Support Resources: Management of the PWR's human, material, and financial resources will have been optimized and improved to facilitate the technical cooperation process

HEALTH IN EQUITABLE HUMAN DEVELOPMENT

PURPOSE

To ensure that the State and society as a whole accept health as one of the key elements in fostering equitable human development.

EXPECTED RESULTS

- . Rights to Health: Advocacy efforts for rights in health will continue within the framework of human rights for excluded populations
- . Macroeconomics and Health: Support will have been provided for the generation of health investment proposals in Peru, based on the subregional Andean environment, in coordination with ORAS/CONHU
- . Universal Health Insurance: The development and sustainability of universal health insurance as a component of equitable human development will have been bolstered
- . Redistributive Measures: The preparation of strategic proposals to promote redistributive measures with respect to quality essential drugs and other critical health supplies will have been supported

STRENGTHENING DECENTRALIZATION AND THE STEERING ROLE IN HEALTH

PURPOSE

To strengthen the administrative, regulatory, coordination, and management capacity of the health authority at the national, regional, and local levels.

EXPECTED RESULTS

- . Strengthening the Coordinated and Decentralized National Health System: National and regional health authorities will have a set of instruments, based on the essential public health functions, to improve the performance of the coordinated and decentralized national health system
- . Quality of Care: At the end of the biennium, the Ministry of Health will have designed and implemented a national system to monitor the quality and safety of care
- . Technology Management: At the end of the biennium, the Ministry of Health will have a plan for technology management that integrates clinical engineering, telemedicine, other information technologies, and applied research
- . Health Information: At the end of the biennium, the Ministry of Health, with support from PAHO, will have redesigned the national health information system on the basis of decentralization standards and EPHFs
- . Care Networks: The Ministry of Health will have a set of criteria, standards, rules, and mechanisms to facilitate the work of the Regional Health Bureaus in managing hospitals and integrating them into the care network, including the extension of services to poor populations in sparsely populated areas who do not have access
- . Comprehensive Care: At the end of the biennium, the Ministry of Health will have an impact assessment of the health gains produced by the new comprehensive care model, including access to oral health care and prevention activities for non-communicable health problems.
- . Human Resources: At the end of the biennium, the Ministry of Health will have a set of mechanisms, guidelines, standards, and methodologies for decentralized Human Resource management, regulation, and administration

THE CULTURE OF HEALTH AND PROMOTING A HEALTHY LIFE

PURPOSE

To promote the concepts of a healthy, active, and quality life in the health sector, seeking safe and healthy environments in each stage of the life cycle.

EXPECTED RESULTS

- . A health determinants approach: The determinants approach is systematically and routinely incorporated into the characterization of the country's health status
- . Advocacy for Improving Environments and Behaviors: Based on advocacy work, leading social actors, primarily the authorities, will have further focused their policy, resource, and activity decisions on improving environments and behaviors that are beneficial to health
- . Partnerships and Intersectoral Plans: The creation of partnerships and the preparation of intersectoral plans that generate healthy and safe behaviors and spaces will have been promoted on a national and regional level

RISK AND THREAT PREVENTION AND CONTROL**PURPOSE**

The national health system has boosted its capacity for the analysis, prevention, and control of priority risks and threats, as well as for disaster prevention and preparedness.

EXPECTED RESULTS

- . ASIS and Information System: Plans, methodologies, and standards will have been developed so that the national health system has complete, timely, and quality health information for decision-making
- . Health Technology: Methods for improving health technology management will have been transferred
- . Prevention and Control: The execution of prevention and control strategies for health risks, hazards, and threats will have been fostered
- . Disasters: Conditions allowing the Ministry of Health and other sectors to coordinate among themselves in terms of emergency and disaster prevention and preparedness actions, will have been improved

PUERTO RICO

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The current health situation in Puerto Rico reflects a four-decade transition toward chronic non-communicable diseases, in contrast to the 1960s, when a large number of infectious diseases still figured in the mortality rate. Longer life expectancy for both men and women has led to the growth of the aging population in the population pyramid, a phenomenon associated with improvements in the public health sector and access to drugs for the control and elimination of diseases. These factors, combined with the statistics, demonstrate that the 10 leading causes of death in Puerto Rico are chronic diseases, which will require efforts to bring about changes that minimize risk factors for the population. Furthermore, the prevalence of AIDS cases is one of the highest in the Americas, notwithstanding the reduction in deaths from AIDS as a result of greater access to drugs. Finally, a large proportion of the population suffers from allergic rhinitis and sinusitis, which suggests that environmental measures should be instituted to improve air quality and thus reduce complications from these conditions.

The Puerto Rico Department of Health needs to improve health sector management in the following areas, in line with the current needs of the population:

- . disease prevention and health promotion
- . insurance, financing
- . public policy legislation
- . accreditation and regulation
- . strengthening of the steering role in health

PROJECTS

STRENGTHENING THE STEERING ROLE OF THE HEALTH DEPARTMENT

PURPOSE EXPECTED RESULTS

- . Health Information: Strengthened systems, management, and dissemination of health information
- . Strengthening the Emergency/Biosafety Response Capacity: Proposals for public policies in the areas of emergency and biosafety
- . Communicable and Noncommunicable Diseases: Creation of cooperation networks and partnerships for disease control and surveillance, including mental health
- . Health Systems: Research study and evaluation in health developed
- . Planning and Communication: Strengthened capacity for planning and communicating for health
- . Presence of PAHO in Puerto Rico: Strengthening the presence of PAHO in Puerto Rico

SURINAME

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The Government of Suriname in July 2004 approved the Health Sector Plan (HSP) 2004-2008, which provides a framework for the BPB 2006-07. In the framework of the HSP and the Millennium Development Goals (MDGs), and noting the inputs of other actors in the development arena, the BPB aims to focus strategically on areas that will enhance the Ministry of Health's capacity to support selected elements of the HSP that are essential to the sustained achievement of the MDGs, including actions of the *Organizacion del Tratado de Cooperación Amazónica* (OTCA, the Organization of the Amazonian Cooperation Treaty – members: Brazil, Bolivia, Colombia, Ecuador, Guyana, Peru, Suriname, and Venezuela) in selected areas.

The national priorities for technical cooperation with PAHO/WHO are:

- . Strengthening the capacity of the Ministry of Health to carry out the Essential Public Health Functions;
- . Support to implementation of the Integrated Management of Childhood Illness (IMCI) strategy;
- . Strengthening maternal mortality reduction;
- . Support for the implementation of the Global Fund project on malaria control;
- . Strengthening national capacity to scale up the response to HIV/AIDS;
- . Resource mobilization for tuberculosis control;
- . Increasing the use of evidence in the prevention and control of noncommunicable diseases;
- . Supporting Suriname's collaboration with other OTCA Member States to address malaria, mercury, and HIV/AIDS.

PROJECTS

COUNTRY OFFICE OPERATIONS

PURPOSE

To achieve integrated, effective, and efficient Country Office operation.

EXPECTED RESULTS

- . Fast response to project requirements.

STRENGTHENING THE CAPACITY OF THE MINISTRY OF HEALTH

PURPOSE

To strengthen the capacity of the Ministry of Health in acquitting the essential public health functions, related to human resource management, planning, monitoring and evaluation, and communication.

EXPECTED RESULTS

- . Improved instruments and systems for effective human resource management, and required knowledge, skills, and attitudes developed.
- . Improved instruments and systems for effective planning, monitoring and evaluation, and required knowledge, skills, and attitudes developed.
- . Improved instruments and systems for effective internal and external communication, and required knowledge, skills, and attitudes developed.

STRENGTHENING PRIMARY HEALTH CARE AND PREVENTION

PURPOSE	To reduce maternal mortality in women of child-bearing age and infant mortality in children under 5.
EXPECTED RESULTS	<ul style="list-style-type: none"> . Ministry of Health and other implementing agencies have sufficient resources allocated, policy formulated and regulations instituted for introduction of IMCI. . Plans, protocols, and assistance provided to national technical team for finalization and execution of implementation plan for IMCI. . Agreement reached by IMCI planning team on steps toward implementation of IMCI. . National planning and implementation team supported with materials and training for communities and other core institutions in support of activities to improve women's and children's health. . Continuation of Expanded Program on Immunization supported for increased vaccination coverage for all antigens in vaccination program. . Project coordination, guidance, and support secured. . IMCI broadly accepted and practiced at all levels of health service delivery, to include all basic MCH services, including EPI. . National capacity to design and implement community water supply and sanitation projects strengthened.

MATERNAL MORTALITY REDUCTION

PURPOSE	To improve the institutional capacity to deal with the three delays in maternal care, in cooperation with the Ministry of Health, UNFPA, and other development partners.
EXPECTED RESULTS	<ul style="list-style-type: none"> . Quality of maternal and newborn care and family planning services improved through the development and implementation of appropriate guidelines and tools for developing and reviewing national policy, standards of care, and protocols. . Emergency Obstetric Care (EmOC) established and maintained in selected health facilities. . Increased safe sexual practices and prevention of unwanted pregnancies among adolescents supported, in cooperation with Stichting Lobi, UNFPA, and UNICEF. . Research, monitoring, and evaluation of maternal mortality reduction, including progress made and strategies and interventions needed for the achievement of the MDG5, supported and relevant information made available for both the general public and policymakers.

SUPPORT FOR AND IMPLEMENTATION OF THE MALARIA GLOBAL FUND PROJECT

PURPOSE	To increase the efficiency of malaria control and prevention in Suriname.
EXPECTED RESULTS	<ul style="list-style-type: none"> . Percentage of children under 5 in the areas with malaria sleeping under bed nets increased. . Prompt diagnosis and treatment with ACTs available in the health service.

REDUCTION OF THE SPREAD AND IMPACT OF HIV/AIDS IN SURINAME

PURPOSE	To increase access to preventive services, ARV treatment, care, and support services.
EXPECTED RESULTS	<ul style="list-style-type: none"> . National MTCT program operational. . Decentralized ARV treatment program operational. . National Strategic Plan implemented according to plan and timetable.

MOBILIZATION OF RESOURCES FOR TB PROGRAM IN SURINAME

- PURPOSE** To increase the efficiency of the TB program in Suriname.
- EXPECTED RESULTS**
- . Global Fund funding obtained for the TB program in Suriname.

NONCOMMUNICABLE DISEASES

- PURPOSE** To have evidence-based decisions for non-communicable disease (NCD) prevention and control.
- EXPECTED RESULTS**
- . Protocols developed for the main chronic diseases in Suriname.

COUNTRY COOPERATION LEADERSHIP AND COORDINATION

- PURPOSE** To improve country cooperation leadership and coordination.
- EXPECTED RESULTS**
- . Effective national and regional communication forum established.
 - . Human resource capacity increased.

TURKS AND CAICOS

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The Turks and Caicos Islands (TCA) comprise one of the internal self-governing United Kingdom Overseas Territories (UKOTs) in the Caribbean. Given the limited health information systems in TCA, a health sector development program outlined in 2001 highlighted the development of information and surveillance systems as one of its outputs. The relatively limited resources available for PAHO's technical cooperation will therefore focus on this national priority.

PROJECTS

EVIDENCE BASED DECISION MAKING

PURPOSE

Mechanisms for evidence based decision making strengthened.

EXPECTED RESULTS

- . National health information and surveillance system strengthened.
- . National health research program developed.
- . Reproductive health information systems strengthened.

TRINIDAD AND TOBAGO

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The country is undertaking health sector reform (HSR), through an externally supported project and a complement of national resources that will end in 2006. However, the Government has indicated that it will incorporate the key project elements into its national health development program. The HSR project provides the main framework for PAHO/WHO's technical cooperation in 2006-07, in the context of the Ministry of Health's performance of the Essential Public Health Functions (EPHF) and the Millennium Development Goals (MDGs).

The national priorities for technical cooperation with PAHO/WHO are:

- . Improving human resource planning and development;
- . Improving institutional capacity for risk management, including updating and strengthening plans and programs for disaster preparedness and mitigation;
- . Strengthening health services management, quality assurance, and access to essential medicines;
- . Optimizing intersectoral coordination between the health and agricultural sectors;
- . Improving health information and surveillance systems, including building institutional capacity in data management, evidence-based policy formulation, program planning, monitoring, and evaluation;
- . Strengthening communicable diseases prevention and control, with emphasis on HIV/AIDS/STIs, tuberculosis, dengue, and lymphatic filariasis;
- . Improving sexual and reproductive health programs;
- . Strengthening the integration of health promotion strategies into the health system and assisting the Ministry of Health in defining its primary health care model;
- . Strengthening the financing of the health sector, including the development of a well-defined National Health Insurance system; and
- . Promotion of technical cooperation among countries (TCC), including the development of well-defined projects.

PROJECTS

HEALTH SYSTEMS DEVELOPMENT AND ESSENTIAL MEDICINES

PURPOSE

To strengthen the capacity of the Ministry of Health to deliver quality health services and essential medicines that are equitable, effective, efficient, and financially sustainable.

EXPECTED RESULTS

- . Modifications to health financing mechanisms supported.
- . Mechanisms and capacity for data analysis and information dissemination in support of increased access to knowledge improved.
- . Ministry of Health supported in the development and monitoring of national drug policies that facilitate accessibility and affordability of drugs.
- . Development of quality improvement and quality assurance programs in the delivery of health services supported.
- . Primary Health Care strengthened through advocacy, formation of strategic alliances, dissemination of information, and production of tools and guidelines.

- . Managerial capacities of Ministry of Health and Regional Health Authorities (RHAs) strengthened.
- . Support provided to the Health Systems Development Project.
- . Level of disaster preparedness improved.

MANAGEMENT OF THE REPRESENTATION

PURPOSE

To streamline the Representation's managerial capacity in order to adopt a more integrated and strategic approach in supporting the delivery of technical cooperation in the country.

EXPECTED RESULTS

- . Implementation of the technical cooperation program monitored to ensure its efficient and effective execution.
- . Information shared with a wide range of counterparts.
- . Increased capacity to manage and coordinate national and international cooperation to advance national health development.
- . Increased advocacy and/or planning with health development partners at the country level.
- . Appropriate and cost-effective procurement and logistical support maintained for office operations/security.
- . Technical cooperation among countries (TCC) promoted and supported within the scope of the different areas of work of the Organization.

COMMUNICABLE DISEASES PREVENTION AND CONTROL

PURPOSE

To strengthen technical capabilities in country to respond to communicable disease prevention and control according to national strategic plans and policies.

EXPECTED RESULTS

- . Integrated strategy to prevent and control dengue implemented.
- . Strategies promoted and implemented for the elimination of lymphatic filariasis.
- . Support provided for the development of DOTS in all RHAs by end of 2007.
- . Surveillance systems for TB and HIV/AIDS improved nationwide.
- . Information provided on services to PLWHA with 100% confidentiality and respect for human rights.
- . Support provided for links between treatment and preventive health services for STI.

SUSTAINABLE DEVELOPMENT AND HEALTH

PURPOSE

To support intersectoral action and human and institutional development strategies to reduce the impacts of social, biological, chemical, and physical hazards.

EXPECTED RESULTS

- . Development of science-based surveillance tools for risk assessment and management.
- . Capacity in the health sector strengthened for implementing actions.
- . Implementation of targeted interventions through partnerships.
- . Capacities in the areas of risk communication and food safety education strengthened.
- . Risk assessment capacity strengthened.

PROMOTION OF HEALTHY LIFESTYLE

- PURPOSE** To strengthen national NCD programs and to integrate health promotion effectively into national, regional, and local plans, and to receive supported from all sectors in the country.
- EXPECTED RESULTS**
- . Capacity strengthened to foster healthy public policy on HP/NCD, including mental health: Country capacity strengthened to foster healthy public policy with participation of civil society/community organizations.
 - . Country capacity improved for the design and implementation of HP plans of action and integration into health services.
 - . Program designed to promote safe roads for youths in and out of school, violence prevention with multisectoral participation: Country capacity strengthened to promote good health engaging youths in and out of schools, teachers, parents and CBO's.
 - . Project supported for execution: Project executed according to plan.

FAMILY AND COMMUNITY HEALTH

- PURPOSE** To support the development of holistic evidence-based services with integrated care interventions for women, child, youths and men in a healthy environment framework.
- EXPECTED RESULTS**
- . Integration facilitated of male/female sexual and reproductive health (SRH) into national/regional health information and surveillance systems.
 - . NSP for SRH implemented to support the reorientation of health services at RHA levels.
 - . Integration of gender sensitive variables and family violence into the information and surveillance system.
 - . Cost-effective evidence based HIV/AIDS interventions for youths and selected group integrated in healthy spaces settings.
 - . Vaccination services provided with equity and efficiency by all stakeholders.
 - . Efficient and effective project administration facilitated.

URUGUAY

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

According to its social-demographic profile, Uruguay has completed its demo-epidemiological transition. To this can be added new problems from emerging and resurging diseases, as consequence of the financial economic crisis at the beginning of this century, which caused a financial imbalance in the public health and private sector. The new government which took over in 2005 has created for the sector the Ministry of Social Development and established PANES (Plan Nacional de Atención a la Emergencia Social) which has a Health Emergency Plan, to be executed through the MOH, and will have emphasis on PRAT (Dental Health Project), HIV/AIDS, AIEPI, adolescents, Productive and healthy municipalities, equipment supply, among others. In 2003 an interagency group was developed to define the priorities that will allow attainment of the MDGs. The exercise to adjust the cooperation will be developed through the CCS (July-August 2005).

The national priorities for technical cooperation with PAHO/WHO are:

- Cooperation in the implementation of the PANES and the Health Emergency Plan, including PRAT.
- Strengthen public health components for the prevention and reduction of transmissible and non-transmissible diseases.
- Strengthen national efforts in the development of an Extended Immunization Plan and infant, maternal and adolescent care, AIEPI.
- Strengthen national capacity in epidemiological surveillance, information system and health situation analysis.
- Support to the development of healthy and productive municipalities and the evaluation of FIDA (International Fund for Agricultural Development)
- Support the success of maintaining the country free from Aftosa fever.
- Cooperation with the Executive Unit of the Italian Cooperation in the MOH to strengthen: a) first level care for chronic diseases, disabilities and increase the capacity of resolution; b) surgical capacity of regional centers; c) capacity to overcome emergencies.
- To provide interchange of experiences and develop technical cooperation among countries and borders.

PROJECTS

SUPPORT FOR PROGRAM MANAGEMENT AND COORDINATION

PURPOSE

Provide the conditions needed for effectively executing cooperation to facilitate implementation and development of the national public health priorities set by the Uruguayan government and their adoption by subregional integration bodies.

EXPECTED RESULTS

- Management and use of resources: Representative Office trained to effectively manage technical, administrative, and financial resources.
- Cooperation and managerial capacity: Representative Office responds aptly to meet the demand for cooperation, with participatory management.
- Intersectoral coordination: Strengthened intersectoral coordination.
- Decentralized actions: Consolidated decentralized actions, with the Congress of Municipal Officials, departments and other entities in the country's interior.

- Strengthening of subregional and interagency actions and Millennium Development targets: Coordination and integration of the subregional and interagency activities carried out by the Representative Office to promote and help meet the Millennium Development targets.

HEALTH PROMOTION AND THE CONTROL OF NCD

PURPOSE	Improve public knowledge about health; strengthen the health sector's advocacy and social-mobilization capacity and the national surveillance system for monitoring lifestyles and living conditions.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Improvement in the country's capacity to develop a comprehensive health promotion plan: Strengthen country capacity to develop a comprehensive health promotion plan. • Strategies reoriented to promotion and prevention implemented by health institutions and services: Strategies reoriented to promotion and prevention implemented by networks of relevant public agencies and health services. • Multisectoral and social-participation strategies to promote healthy environments and lifestyles: Strengthened multisectoral and social-participation strategies to promote healthy spaces, especially smoke-free environments, in accordance with FCTC standards, and to promote healthy lifestyles with reduced risk factors for NCDs--that is, smoking, alcohol, sedentary lifestyle, nutrition, obesity, and unintentional accidents. • Implement national system for surveillance of lifestyles, health determinants, and risk factors for NCDs: Implement national system for surveillance and monitoring of lifestyles, health determinants, and risk factors for NCDs. • Strengthened program for maternal, child, and adolescent health, in keeping with country priorities and the Millennium Development targets: Program for maternal, child, and adolescent health strengthened in keeping with country priorities and the Millennium Development targets through health promotion, Integrated Management of Childhood Illness (IMCI), and the Expanded Program on Immunization (EPI). • Mass communication and public information. Area of mass communication and public information strengthened to support health and relations with the community.

STRENGTHENING OF HEALTH SYSTEM AND HEALTH

PURPOSE	Improve performance in the exercise of the Essential Public Health Functions (EPHF)--in particular, the functions of public health workers; help meet Millennium Development Goals Nos. 3, 4, 5, and 6; and their adoption by subregional integration agencies (MERCOSUR, LAIA).
EXPECTED RESULTS	<ul style="list-style-type: none"> • Health services: Improved health services in terms of quality, coverage, and equity, with emphasis on primary health care. • Human resources: Public health personnel better adapted to the model of care defined and performance of the EPHF. • Health situation analysis in Uruguay: Improved quality and timeliness of data, information, and health situation analysis. • Management and dissemination of health information: Strengthened health information infrastructure based on evaluation of the multiple needs of users, with information disseminated through the Documentation Center, VHL-PWR, VHL-Uruguay, VHL topics, and the national network. • Disasters and emergencies: Strengthened country capacity to respond to major disasters, natural emergencies, and accidents.

DISEASE CONTROL

- PURPOSE** Strengthen public health components that help prevent and lower the incidence and/or prevalence of communicable diseases.
- EXPECTED RESULTS**
- Control of communicable diseases: Strengthened capacity to prevent, monitor, and control prevalent, emerging, endemic, epidemic, and exotic communicable diseases, pursuant to Millennium Development Goal Number 6 and the Uruguayan target on disease control, within the framework of MERCOSUR.
 - Prevention, surveillance and control of zoonoses: Strengthened prevention, surveillance, and control of zoonoses, based on integration of the health and agriculture sectors and relevant institutions, including an integrated approach to foot-and-mouth disease, pursuant to Millennium Development Goal Number 6 and the Uruguayan target on disease control, within the framework of MERCOSUR.
 - Technical cooperation in food safety: Strengthened national and departmental ability to implement intersectoral food-safety strategies with community participation pursuant to Millennium Development Goal Number 1 and the Uruguayan target on indigence and poverty, within the framework of MERCOSUR.
 - Regional Advisory Services on the Control of Chagas' Disease: At the regional level, vector-borne transmission of Chagas' disease interrupted in various areas of the Southern Cone and Central America, as well as Mexico and the Andean and Amazon regions, and reduced vector-borne and transfusion transmission throughout the rest of the region.

ENVIRONMENTAL HEALTH AND SUSTAINABLE DEVELOPMENT

- PURPOSE** Strengthen components of environmental health in sanitation, environmental quality, and occupational health that improve environmental indicators and contribute to a decline in the prevalence and incidence of associated diseases, pursuant to Millennium Development target Number 11 and the Uruguayan target on people living in slums, within the framework of MERCOSUR.
- EXPECTED RESULTS**
- Environmental sanitation: Greater ability to carry out environmental sanitation activities with a health criterion in water and sanitation, urban solid and special waste, air pollution and air quality, pursuant to Millennium Development target Number 11 and the Uruguayan target on people living in slums.
 - Environmental quality: Greater ability to carry out actions in environmental quality with a health criterion in the areas of water, air, and pollution, pursuant to Millennium Development target Number 11 and the Uruguayan goal on people living in slums.

UNITED STATES OF AMERICA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

The purpose of technical cooperation with the United States is to address the needs and promote the participation of the United States in global and international health, including facilitating the participation of the United States in PAHO's regional programs and making U.S.-based resources and expertise available to other countries worldwide and in the Americas. The primary counterpart of the Pan American Sanitary Bureau is the Office of Global Health Affairs (OGHA), specifically the Office of the Americas and the Middle East in OGHA. In addition, the Bureau works directly with nearly all of the agencies and major offices of the Department.

Specific priorities addressed in the 2006-07 program are:

- The Healthy People initiative: The United States will support the development of health promotion and of disease prevention capacity in selected areas in the United States and other countries in the Region. The approach used in Healthy People 2010 will be used to complement other initiatives in disease prevention and in health promotion.
- Safe motherhood and improving maternal health, specifically the reduction of maternal mortality: Related to this are efforts to improve adolescent health, including the reduction of risky behaviors in that age group.
- Health of communities along the United States - Mexico border: Efforts and resources will go into identifying and addressing the needs of communities on both sides of the border in environmental health, women's health, chronic diseases, immunization, and mental health, among others. Technical cooperation activities along the United States - Mexico border will be carried out in conjunction with the El Paso Field Office and the Binational Health Councils of the United States – Mexico Border Health Association. In addition, increasing collaboration with the United States – Mexico Border Health Commission will be sought.
- Health care issues of migrant and uninsured populations.

PROJECTS

REGIONAL COOPERATION ACTIVITIES

PURPOSE

- To cooperate with federal, state, and local authorities and the private sector to address global, regional, and national health issues that impact and are of concern to the U.S. population.
- To collaborate with federal, state, and local governments, universities, and other actors to address major health issues on the U.S.-Mexico and U.S.-Canada borders, in coordination with the El Paso Field Office and with Health Canada.

EXPECTED RESULTS

- Activities implemented in priority areas of cooperation: Greater participation by the United States in regional and global programs.
- Support, participation and knowledge of PAHO: Activities to enhance the image and presence of PAHO as a leading health institution in the Americas.

VENEZUELA

NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

A country with low economic growth, characterized by recurrent inflationary and recessive episodes during the last decade, with inequities to health access and basic services. In 1999 started a process of political, legal, economic and social transition towards a participative democracy with a new national constitution. Politics to overcome poverty plan an strategy of integration and the application of the Missions social strategies, which in health is the Barrio Adentro Mission and was initiated 2003. CCS will take place during the second semester of 2005. It is a member of the Executive Committee of PAHO/WHO (2004-2007). Among the national priorities we must draw attention to the development of a National Public Health System, within the APS concept, for fair access and universal coverage and the lead function of the national sanitation authorities.

The national priorities in technical cooperation with PAHO/WHO are:

- Political and technical support to the integration of the National Public Health System.
- Reinforce the National Pharmaceutical System.
- Develop proposals and/or training on legal framework and health policies, food, environment, pharmaceuticals, emergencies and disasters.
- Strengthen the areas of regulation and government to attain the essential functions of public health during the decentralization process.
- Strengthen the surveillance system in public health in support to health services.
- Technical support in the development of a Network of Health Services based on the APS.
- To provide support to the work of the units of the different Ministries involved in the programs to control and eradicate zoonosis and aftosa fever.
- Strengthen the planning, training and management of human resources to fortify the APS in the National Public Health System.
- Strengthen the capacity to guarantee equitable access to essential medicines.
- Strengthen the capacity of prevention and control of transmissible and non-transmissible diseases.
- Strengthen the national capacity to consolidate the eradication of measles and polio, and cover all the estates for Vaccine-preventable diseases.
- Develop the technical capacity of the Food Ministry in the regulation, planning, execution, and monitoring of food safety and security and nutritional activities.
- Develop technical capacity of the institutions connected with environmental health and risk management.
- Develop APS policies in each estate of the country.

PROJECTS

MANAGEMENT AND SUPPORT FOR NATIONAL DEVELOPMENT OF VENEZUELA, ARUBA, AND THE NETHERLANDS ANTILLES

PURPOSE

To provide technical cooperation to Venezuela, Aruba, and the Netherlands Antilles that effectively and efficiently meets national priorities.

EXPECTED RESULTS

- Support to the development of health in Venezuela, Aruba, and the Netherlands Antilles strengthened.

- Program management and coordination of Venezuela, Aruba and the Netherlands Antilles strengthened.

HEALTH SECTOR PRINCIPLES TO ACHIEVE THE GOAL OF HEALTH FOR ALL

PURPOSE	Strengthen the National Health Authority and its steering role in the performance and management of the essential public health functions to guarantee the right to health as enshrined in Venezuela's Constitution
EXPECTED RESULTS	<ul style="list-style-type: none"> • Strengthened National Pharmaceutical System capable of guaranteeing equitable access to quality, safe, and effective drugs, administered according to basic criteria to ensure more rational use, thus helping improve quality and effectiveness of health system. • Proposals developed and/or updates made to the legal framework and policies in the areas of health, nutrition, environment, drugs, emergencies, and disasters. • Political and technical support for national efforts to integrate the national public health system through negotiation and consensus-building mechanisms that strengthen the steering role of the Ministry of Health and Social Development, and technical integration instruments (information systems, integrated health services networks, maintenance and conservation, and drug supplies). • Ministry of Health and Social Development's steering role in regulation and control strengthened to meet the essential public health functions that permit progress in integrating the subsystems of the national public health system, managing state and municipal decentralization in the country, monitoring the quality of public and private services, making informed decisions, guaranteeing equitable access to public and private health services, and reducing inequities in health.

UNIVERSAL EQUITABLE ACCESS TO HEALTH SYSTEMS AND SERVICES WITHIN THE FRAMEWORK OF PRIMARY HEALTH CARE STRATEGY

PURPOSE	Improve the performance of the national public health system and services, through primary care, to gradually achieve equitable access and universal health coverage for the entire Venezuelan population and help meet the Millennium Development targets.
EXPECTED RESULTS	<ul style="list-style-type: none"> • Strengthened system for monitoring public health, including support for health service management, health situation analysis (HSA), epidemiological surveillance, situation room, population-based information systems (georeferenced, vital statistics, and core data systems) and epidemiological training by levels of care. • Technical support to develop an Integrated Health Services Network based on the PHC in at least six states in the country that includes functional integration of the various levels of the different subsystems of the principal public health care providers (MSDS, IVSS, IPASME), to ensure equitable access to services characterized by timeliness, quality, efficiency, integrated care, and community participation. • The various agencies involved will work together in programs for the control or eradication of zoonoses and foot-and-mouth disease, combining resources to address the problems of land, laboratory diagnosis, and situation analysis. • Strengthened capacity of the Ministry of Health and Social Development to plan, train, and manage the personnel needed to strengthen PHC in the public health system. • Strengthened capacity of Venezuelan officials to guarantee equitable access to essential drugs. • Strengthened national capacity to consolidate the eradication of polio and measles and achieve significant coverage for the rest of the vaccines in the national series in all states of the country. • Prevention and control of communicable and non-communicable diseases.

- Institutions involved in environmental health and health risk management will develop technical capabilities to evaluate, monitor, and carry out actions inherent to basic services: drinking water and sanitation, solid waste, housing, as well as concrete actions in planning evaluation, and control of health and environmental risks (air pollution, chemical and physical pollution) especially in the most critical areas and priority populations, to help meet the Millennium Development targets.
- Primary health care policy developed in every state of the country, with the support of areas and programs corresponding to the life cycle, with social participation for social control of local management and development.
- Development of the technical capacity of the Ministry of Nutrition and other institutions involved in regulation, planning, execution, coordination, and monitoring of activities in nutrition and food security and food safety.
- National, state, and local institutional capability strengthened in order to implement primary health care policy and programs aimed at promoting community participation to achieve internal development and improve the quality of life.
- Technical Cooperation among Countries in Health.
- Activities will be carried out to promote health care for children in the home through community development of proper practices for children's health care nationwide.