

# CARIBBEAN

## NATIONAL PRIORITIES FOR PAHO TECHNICAL COOPERATION

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

## PROJECTS

### MENTAL HEALTH

#### PURPOSE

To strengthen the reform of mental health systems .

#### EXPECTED RESULTS

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

### FAMILY HEALTH

#### PURPOSE

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

#### EXPECTED RESULTS

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

### NONCOMMUNICABLE DISEASE (NCD) PREVENTION AND CONTROL

#### PURPOSE

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

#### EXPECTED RESULTS

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

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

### **REORIENTING HEALTH SYSTEMS**

#### **PURPOSE**

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

#### **EXPECTED RESULTS**

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

### **MANAGEMENT OF TECHNICAL COOPERATION**

#### **PURPOSE**

To manage technical cooperation.

#### **EXPECTED RESULTS**

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

### **ENVIRONMENTAL HEALTH (EH) AND DISASTERS**

#### **PURPOSE**

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

#### **EXPECTED RESULTS**

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

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

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

**EXPECTED RESULTS**

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

**RESOURCES (US\$)**

		Regular budget	Other sources	All funds
Total 2002-2003		6,990,100	1,497,200	8,487,300
Total 2004-2005		7,054,600	50,000	7,104,600
Percentage of estimated expenditure	Country program support	38%	-	38%
	Intersectoral action and sustainable Development	10%	100%	11%
	Health information and technology	10%	-	9%
	Universal access to health	17%	-	17%
	Disease control and risk management	14%	-	14%
	Family and community health	11%	-	11%