# **PAHO**

# Funding Mechanism for Cooperation among Countries for Health Development

Procedures and Guidelines





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# **Definitions**

TCC - Technical Cooperation among Countries	The meeting of experts on technical cooperation among developing countries (TCDC), convened in 1990 by the United Nations Development Program (UNDP), defined TCDC as the "execution and management of development activities and projects by institutions of the developing countries, in which they share experiences and mutual technical capabilities and utilize, whenever necessary, advisory services and financial support from external sources, among them the organizations of the United Nations development system. In this regard, TCDC should be considered an integral part of the national, regional, and interregional programs for international technical cooperation."  In the document presented by PAHO at the Interregional Consultation on TCDC Programming in Health, convened by WHO in Jakarta in 1993, it was reaffirmed that, for the Region of the Americas, the term TCDC will be understood as TCC—that is, technical cooperation among countries—whatever the degree of development of the country, consistent with the Organization's historic tradition of Pan Americanism.  Technical Cooperation Among Countries: Panamericanism In The Twenty-First Century. CSP25/9 - http://iris.paho.org/xmlui/handle/123456789/4349
CCHD - Cooperation among Countries for Health Development	Cooperation among countries and horizontal partnerships are understood to be dynamic processes and arrangements that do not have a predefined structure; instead, they are flexible and adaptable to the particular challenges and political frameworks of the countries involved. Arrangements can be bilateral (between two countries), triangular (between two countries with financial or other support from a third source, either another country or an international cooperation partner), or consist of a collaborative network that brings many countries and actors together towards a shared goal. The common factor is that all the arrangements should be country-led and based on exchanges of knowledge, skills, resources, technology, or technical know-how through collective actions and inclusive partnerships involving governments, civil society, academia, and the private sector, for the individual and/or mutual benefit of the countries involved  Cooperation For Health Development In The Americas. Policy Document - CD52/11 - <a href="http://iris.paho.org/xmlui/handle/123456789/4404">http://iris.paho.org/xmlui/handle/123456789/4404</a>

South-South cooperation is a broad framework for collaboration among countries of the South in the political, economic, social, cultural, environmental and technical domains. Involving two or more developing countries, it can take place on a bilateral, regional, subregional or interregional basis. Developing countries share knowledge, skills, expertise and resources to meet their development goals through concerted efforts. Recent developments in South-South cooperation have taken the form of increased volume of South-South trade, South-South flows of foreign direct investment, movements towards regional integration, technology transfers, sharing of solutions and experts, and other forms of exchanges.

Triangular cooperation (TrC) refers to an SSC partnership as defined above that is assisted by a development partner of one of the OECD/DAC member countries, an emerging economy, a multilateral agency, international foundation, or international NGO. The assistance may be in the form of financial, technical or administrative support.

South-South and triangular cooperation in health: current status and trends: summary of findings from an analysis undertaken on behalf of IHP+. World Health Organization 2014 -

http://www.internationalhealthpartnership.net/en/news-videos/ihpnews/article/south-south-and-triangular-cooperation-in-health-329112/

South-South Cooperation and Triangular Cooperation South-South cooperation is a broad framework of collaboration among countries of the South in the political, economic, social, cultural, environmental and technical domains. Involving two or more developing countries, it can take place on a bilateral, regional, intraregional or interregional basis. Developing countries share knowledge, skills, expertise and resources to meet their development goals through concerted efforts. Recent developments in South-South cooperation have taken the form of increased volume of South-South trade, South-South flows of foreign direct investment, movements towards regional integration, technology transfers, sharing of solutions and experts, and other forms of exchanges.

Triangular cooperation is collaboration in which traditional donor countries and multilateral organizations facilitate South-South initiatives through the provision of funding, training, management and technological systems as well as other forms of support.

Guiding Principles of South-South Cooperation

South-South cooperation is a manifestation of solidarity among peoples and countries of the South that contributes to their national well-being, their national and collective self-reliance and the attainment of internationally agreed development goals, including the 2030 Agenda for Sustainable Development. The South-South cooperation agenda and South-South cooperation initiatives must be determined by the countries of the South, guided by the principles of respect for national sovereignty, national ownership and independence, equality, non-conditionality, non-interference in domestic affairs and mutual benefit.

United Nations Office for South-South Cooperation - <a href="https://www.unsouthsouth.org/about/about-sste/">https://www.unsouthsouth.org/about/about-sste/</a>

## 1-Background

The Pan American Health Organization has a longstanding history in the promotion of technical cooperation among countries (TCC). The origins of TCC in health, as a strategy for accelerating health development through the countries' capacity and potential, lie in the concept of Technical Cooperation among Developing Countries (TCDC). The agreement that marked a milestone in the application of this concept was the Buenos Aires Plan of Action for Promoting and Implementing Technical Cooperation among Developing Countries, signed by 138 States at an event sponsored by the United Nations Organization in 1978.

Among the agencies of the United Nations system, PAHO/WHO stands out for having created a specific budget allotment for TCC as a concrete way of implementing the strategy outlined in 1978 and endorsed in diverse forums. The purpose of the allotment was to call attention to a discipline of cooperation among countries consistent with the very nature of the Organization, which is dedicated to this, as stated in the Constitution of the Pan American Health Organization: "The fundamental purpose...shall be to promote and coordinate efforts

1 United Nations Development Program, Special Unit for TCDC. The Buenos Aires Plan of Action for promoting and implementing technical co-operation among developing countries [Internet]. New York: UNDP; 1994. Available from: <a href="http://ssc.undp.org/content/dam/ssc/documents/Key%20Policy%20Documents/Buenos%20Aires%20Plan%200f%20Action.pdf">http://ssc.undp.org/content/dam/ssc/documents/Key%20Policy%20Documents/Buenos%20Aires%20Plan%200f%20Action.pdf</a>.

of the countries...to combat disease, lengthen life, and promote the physical and mental health of the people."<sup>2</sup>

In the 1980's, the Governing Bodies reaffirmed PAHO's position in order to promote and support TCDC as a mechanism for encouraging the selfsufficiency of the countries, both individually and collectively, in the health sector. In September 1998, the Secretariat of PAHO submitted the document Technical Cooperation among Countries: Panamericanism in the Twenty-first Century<sup>3</sup> to the 122nd Session of the Executive Committee and the 25th Pan American Sanitary Conference. This document advanced the concept of Technical Cooperation among Countries and served as a progress report on TCC in the Region during the celebration of the 20th anniversary of the Buenos Aires Plan of Action. Cooperation among Countries constitutes an ideal mechanism and an opportunity to build partnerships and develop networks with different sectors of society to address the determinants of health through concrete actions and consensus-based public policies aimed at attaining the highest possible level of health for all.

<sup>2</sup> Pan American Health Organization. Constitution of the Pan American Health Organization [Internet]. Available from: <a href="http://www.paho.org/hq/index.php?option=com\_docman&task=doc\_download&gid=13&Itemid=270&lang=en">http://www.paho.org/hq/index.php?option=com\_docman&task=doc\_download&gid=13&Itemid=270&lang=en</a>

<sup>3</sup> Pan American Health Organization. Technical cooperation among countries: Panamericanism in the twenty-first century [Internet]. 25th Pan American Sanitary Conference, 50th Session of the Regional Committee of WHO for the Americas; 1998 Sep 21-25; Washington (DC), US. Washington (DC): PAHO; 1998 (Document CSP25/9). Available from: <a href="http://www.paho.org/english/gov/csp/csp25\_9.pdf">http://www.paho.org/english/gov/csp/csp25\_9.pdf</a>

In 2013 the Directing Council of the Pan American Health Organization approved resolution CD52. R<sub>15</sub><sup>4</sup> and the related Policy Document CD<sub>52</sub>/<sub>II</sub><sup>5</sup> on Cooperation for Health Development in the Americas, which constitutes a new approach to PAHO's delivery of technical cooperation. The policy provides a renewed vision, a conceptual framework and guiding principles for cooperation between countries and horizontal alliances for health development. The Pan American Sanitary Bureau (PASB) facilitates and supports its Member States in the implementation of projects for cooperation among countries for health development (CCHD). This includes continuing ongoing activities such as active participation in international dialogue around South-South Cooperation (SSC) in health, as well as the assessment and improvement of existing support mechanisms for technical cooperation among countries, and sub-regional technical cooperation programs.

The Policy Document categorizes 3 main means for PAHO/WHO to strengthen and promote CCHD:

a) Convening and advocacy. Fostering

4 Pan American Health Organization. Resolution on Cooperation for Health Development in the Americas [Internet]. 52nd Directing Council of PAHO, 65th Session of the Regional Committee of WHO for the Americas; 2013 Sep 30-Oct 4; Washington (DC), US. (Document CD52.R15). Available from:

http://iris.paho.org/xmlui/handle/123456789/4443

cooperation among countries at all WHO levels, including the development of the appropriate mechanisms interregional exchanges. for b) Brokering and knowledge-sharing. Facilitating knowledge and information sharing particularly the documentation and exchange of evidence-based good practices at regional and global levels; develop methodologies to assess cooperation among countries and better measure its impact on health development. mobilizing c) Building partnerships and resources. Promote the forging of strategic partnerships and networks among national institutions and regional centers of excellence that can be called upon to address shared health issues both within and across regions; mobilization of resources to facilitate engagement in such exchanges.

PAHO Member States have also outlined the definitions and guiding principles regarding CCHD, where it is described as "dynamic processes and arrangements that do not have a predefined structure; instead, they are flexible and adaptable to the particular challenges and political frameworks of the countries involved. Arrangements can be bilateral (between two countries), triangular (between two countries with financial or other support from a third source, either another country or an international cooperation partner), or consist of a collaborative network that brings many countries and actors together towards

<sup>5</sup> Pan American Health Organization. Policy Document on Cooperation for Health Development in the Americas [Internet]. 52nd Directing Council of PAHO, 65th Session of the Regional Committee of WHO for the Americas; 2013 Sep 30-Oct 4; Washington (DC), US. (Document CD52/II). Available from: <a href="http://iris.paho.org/xmlui/handle/123456789/4404">http://iris.paho.org/xmlui/handle/123456789/4404</a>

a shared goal. The common factor is that all the arrangements should be country-led and based on exchanges of knowledge, skills, resources, technology, or technical know-how through collective actions and inclusive partnerships involving governments, civil society, academia, and the private sector, for the individual and/or mutual benefit of the countries involved. The guiding principles and values that catalyze cooperation among countries and horizontal partnerships continue to be solidarity, mutual benefit, respect for national sovereignty, respect for diversity, and non-conditionality. [...] PAHO will actively advocate for the inclusion and consideration of the cross-cutting themes of gender equity, equity in health, human rights, and ethnicity in cooperation among countries initiatives in an attempt to ensure that these efforts reach and benefit even the most vulnerable populations."

## 2-Goal of the PAHO Funding Mechanism

Through resolution CD52.R15 and Policy Document CD52/II, Member States mandate the Pan American Sanitary Bureau to strengthen the mechanisms for technical cooperation among countries, promoting their strtegic use to address targeted health priorities and health problems that are most effectively addressed through collective action within and across regions in the framework of the principles of solidarity, sovereignty, dignity, equity, capacity development, and sustainability, aligned with the sectoral health policy of each country, in order to address health issues in the most efficient manner.

Therefore, the CCHD Funding Mechanism is intended to foster greater cooperation between PAHO's Member States where two or more countries agree that joint collaboration is the most efficient and effective way to meet the needs of both. The CCHD Funding Mechanism can also support multi-party projects, including subregional integration entities, as long as they meet the criteria and conditions set out in this document.

Borrowing text from the CCHD Policy Document, the goal of the CCHD Funding Mechanism is to: Strengthen cooperation among countries and horizontal partnerships within and across regions in order to proactively share health solutions that effectively and sustainably address common health problems.

The CCHD Funding Mechanism offers non-recurrent

funding opportunities to support the implementation of innovative, effective and sustainable projects that will have a demonstrable impact on the health situation in countries. The CCHD Funding Mechanism is intended to provide "seed funding" that may be leveraged to facilitate the mobilization of additional resources to promote health and encourage partnerships between Member States, as well as other stakeholders.

The CCHD Funding Mechanism will make use of available administrative tools to promote and sponsor projects. PAHO will leverage existing resources and make use of current procedures to implement the provision outlined in this document.In-keeping with the multi-sectorial approach of the Sustainable Development Goals (SDG's)<sup>6</sup>, and PAHO's own Plan of Action on Health in All Policies<sup>7</sup>, the CCHD Funding Mechanism may support projects not only in the health sector, but also in related sectors (e.g. water and sanitation, education, agriculture, among others) that will have a clear impact on health outcomes. Cross-sector projects with a broad development impact are strongly encouraged.

<sup>6</sup> General Assembly resolution 70/1, Transforming our world: the 2030 Agenda for Sustainable Development, A/RES/70/1 (25 September 2015), available from <a href="http://www.un.org/ga/search/view\_doc.asp?symbol=A/RES/70/1&Lang=E">http://www.un.org/ga/search/view\_doc.asp?symbol=A/RES/70/1&Lang=E</a>

<sup>7</sup> Pan American Health Organization. Plan of Action on Health in All Policies [Internet]. 53rd Directing Council of PAHO, 66th Session of the Regional Committee of WHO for the Americas; 2014 Sep 29-Oct 3; Washington (DC), US. (Document CD53/10 Rev.1). Available from: <a href="http://iris.paho.org/xmlui/handle/123456789/28299">http://iris.paho.org/xmlui/handle/123456789/28299</a>

## **3-Criteria and General Conditions**

The CCHD Funding Mechanism will finance selected projects, subject to the criteria and conditions outlined in this document. As the implementation of the CCHD Funding Mechanism evolves, PAHO will strive to continuously improve its processes so as to implement good practices and lessons learned, seeking effectiveness and efficiency in its operation. The Director of the Pan American Health Organization reserves the right to apply and revise these provisions at his/her discretion.

#### 3.1 Eligibility Criteria

To ensure that the CCHD Funding Mechanism is used to maximize the effect in helping achieve the goals and objectives set out in the PAHO Strategic Plan, the following criteria will be applied; project proposals not meeting these criteria will not be considered.

i. Projects must align with the PAHO Strategic Plan<sup>8</sup>, specifically contributing to, at least, one of its Outcomes and related indicators. ii. Projects demonstrate clear must link the Sustainable Development to with public health relevance Goals, terms of health and health-related targets. iii. **Projects** demonstrate must

8 Pan American Health Organization Strategic Plan of the Pan American Health Organization 2014-2019 [Internet]. 52rd Directing Council of PAHO, 65th Session of the Regional Committee of WHO for the Americas; 2013 Sep 30-Oct 4; Washington (DC), US. (Off. Doc. 345). Available from: <a href="http://iris.paho.org/xmlui/handle/123456789/4031">http://iris.paho.org/xmlui/handle/123456789/4031</a>

clear link to the Sustainable Health Agenda for the Americas 2018-2030 iv. Projects proposals may be submitted by the following counterparts, through and in coordination with the respective PAHO/WHO Representation and/or Subregional Coordinator:

a. Governmental agencies from at least two WHO Member States, including at least one PAHO Member State, Associate State or Participating States b. Sub-regional integration mechanisms<sup>9</sup>, which include a PAHO Member State, Associate State or Participating State

v. The duration of projects shall not exceed 24 months, starting from the date of the first disbursement. A request for extension of, maximum, 12-month at no-cost can be submitted no later than 90 days before the approved end date of the project, with the following requirements: interim progress report, financial report and revised implementation plan.

# 3.2 General Conditions and Institutional Arrangements

i. Disbursements shall be channeled from Headquarters:

<sup>9</sup> These can include, but are not limited to: Unión de Naciones Suramericanas - UNASUR; Caribbean Community - CAR-ICOM, Mercado Común del Sur - Mercosur, Sistema de la Integración Centroamericana -- SICA, among others.

- To the PAHO/WHO Representatives
   (PWR) in the respective project countries,
- To government agencies, in the respective project countries, through PAHO/WHO Representatives

ii. PAHO's contribution will amount a maximum of USD 300,000 per project. iii. **PAHO** will not award funds retrospectively for previously completed activities. for ongoing activities. iv. Projects shall not allocate more than 10% of the total budget to institutional recurrent costs (e.g. rent, utilities) and/or personnel costs. v. Equipment and other fixed asset purchases shall not represent more than 20% of total project costs (e.g. medical infrastructure). vi. Once the implementation period has elapsed, the respective PAHO/WHO Representatives and implementing public sector institutions will be required to return any unspent funding to PAHO, within 90 days of project termination. vii. PAHO will conduct evaluations through third costs. a party. viii. The CCHD Funding Mechanism will not be used to respond to public health emergencies or disease outbreaks. However, projects that increase the preparedness or response capacity of Member States may be considered.

### 3.3 Operational Modalities

PAHO will collect draft projects yearon a rolling basis, through PAHO/WHO Representatives and PAHO/WHO Subregional Program Coordinators. The CCHD Funding Mechanism is intended to be administered in a timely manner, so as to nimbly respond to Member State needs and development priorities. The entire review process is intended to take less than 2 months from proposal submission to notification. Funds disbursed may be allocated to PAHO/WHO Representatives and/or government agencies, as per the submitted and approved project proposal budget.

## 4-Project Proposal Review Process

Projects that meet the eligibility criteria will be submitted for approval of the PAHO Director and shall be reviewed in the following manner:

- Submission and Verification: Proposals are submitted through PAHO's Country Offices and Subregional Coordinators. Eligibility and compliance is verified at Regional level.
- Assessment: The project document is assessed by technical and enabling departments at regional level, resulting in a recommendation to PAHO's Director.
- 3. Notification: PAHO issues a notification through PAHO's Country Offices and Subregional Coordinators, with project document ready for signature between the parties.

#### 4.1 Submission and Verification

Project and budget templates are available through PAHO's CCHD webpage (http://www.paho.org/cchd). These should be completed in full, in English or Spanish, for the project to be considered.

Projects will be submitted through the PAHO/WHO Representatives, to the Country and Subregional Coordination Office (CSC). Note that acknowledgement of receipt of project proposals does not constitute approval or commitment by PAHO/WHO.

PAHO will verify the eligibility criteria, as outlined

above, for all submitted proposals before proceeding with technical assessment. Project proposals which do not comply with the criteria may be rejected, or may be sent back to the project leads for amendment, as appropriate. Only projects meeting all requirements and with supporting documents will be forwarded for technical assessment. Projects are required to have:

- Project Cover Letter: Project cover page with endorsement by the government authority sponsoring the project;
- Project template duly filled-in
- Budget template duly filled-in
- Project support/endorsement letter from other project partners (optional)

#### 4.2 Assessment

Project proposals will be assessed by PAHO technical and administrative departments, and will be conducted taking into account the following criteria (see annex for details):

- Involvement of **PAHO's** priority countries. These countries Suriname, are: Guatemala, Nicaragua, Guyana, Bolivia, Haiti, Paraguay, Honduras. - Project contribution to PAHO Strategic Plan, Sustainable Health Agenda for the Sustainable Americas, Develop Goals and Targets, Country Cooperation Strategies and national health priorities

Project structure will be assessed on the merits of a problem-solving approach, relevance of project objective(s), development of project activities, clearly defined activities with welldefined milestones and deliverables. Wellstructured budget and linked to the activities to be implemented, broken down in sufficient detail to identify all contributions, and if additional funds are required, that it has been secured - Innovative projects will be prioritized over projects that have been previously financed the CCHD Funding Mechanism through - Partners involved in the project expected to be of relevance to the objectives add value through and cooperation - Project's up-take and sustainability shall be considered on the basis of institutional capacity building, allocation of responsibilities among partners, and future financial commitments. consideration - Projects of cross-cutting issues, such as gender, human rights, equity and ethnicity will also be taken into account - Project overall benefits: (i) Contributes to capacity building in one or more countries; (ii) Involves technology transfer; (iii) Involves institutional strengthening in one or more countries; (iv) Exchange of experiences and good practices; (v) Incorporation of cross-cutting issues.

#### 4.3 Notification

Based on the result of the overall assessment of the project, a recommendation shall be made to the Director. The Director will inform his/her decision in the following manner:

- Approved: Once project has been approved, and formal agreements signed (if needed), project shall commence once the first disbursement is made, as per the approved budget allocation.
- Conditioned Approval: Projects shall be conditionally approved if the assessment determinesitshallberevised in its technical aspects, or if there are funding constraints for the project.
- Denied: Projects with unsatisfactory technical and strategic assessment shall not be considered viable for funding.

# 5-Project Reporting and Evaluation

### **5.1 Interim Reports**

For projects over 12 months, designated project leads are required to submit interim project progress and financial reports every six months. If the last programmed interim report is scheduled 4 months (or less) before the end of the project, only the final report shall be submitted.

# 5.2 Final Report and Project Evaluation

The final project report shall be submitted to PAHO within 60 days after the project end date has elapsed, and shall comprehend the entire duration of the project, main activities and results, as well as its financial aspects. The final report shall be endorsed by the Participating Countries and respective PWR's. Individual project evaluation shall be done by a third party, and shall be engaged 30 days prior to the completion of the project, and delivered with the final report of the project.

## 6-CCHD Funding Mechanism indicators

The following indicators will be tracked in order to report to Member States, as per documents CD52. R15 and CD52/11, and used for further improvement of these guidelines.

#### - General Indicators:

- Number and frequency of countries participating in CCHD projects,
   by strategic category, by funds.
- Areas of intervention by strategic categories and Sustainable Development Goals.

#### - Administrative Indicators

- Average of time elapsed from the time complete proposals are received
   by PWR's and notification is issued
- Average of time elapsed from the time complete proposals are received by PWR's and the first disbursement is made

#### - Finance and budget indicators

- Amount programmed/budgeted for CCHD funding mechanism by year
- Amounts disbursed for CHHD projects by year, eligible institutions, strategic category
- Co-financing leveraged for CCHD projects by source, amount, strategic category

#### - CCHD indicators

- Projects that contribute to capacity building, by country, by amount
- Projects that involve technology transfer, by country, by amount
- Projects that involve institutional strengthening, by country, by amount
- Projects that involve exchange
   of experiences and good
   practices, by country, by amount
- Projects that incorporate of cross-cutting issues, by theme, by country, by amount T

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