ECUADOR PAHO/WHO COUNTRY COOPERATION STRATEGY 2024-2028



INTRODUCTION

The WHO Country Cooperation Strategy (CCS) 2024–2028 outlines a medium-term vision to guide joint actions with Ecuador in line with national health priorities. Developed through consultations with the Ministry of Public Health (MSP), stakeholders, academia, NGOs, civil society, the UN System, and international entities, it builds on the 2018–2020 CCS evaluation.

The four strategic priorities of the WHO CSC 2024 – 2028 are Informed by WHO's General Program of Work (GPW) 14 and Panamerican Sanitary Bureau (PASB) priorities and emphasizes health as well-being. Itis aligned with Ecuador's legal framework, National Development Plan (PND), Decennial Health Plan (PDS), and the UNSDCF 2022–2026, focusing on equity and addressing disparities among vulnerable group in the access to universal health.

ABOUT US

The WHO Country Office in Ecuador has one office in the capital of the country – Quito. It belongs to CPCP typology C.
As of 2024, the office has 9 staff. Of these, 1 are CPCP staff (hiring in progress).
In the past biennium the total funding received by the country office was US$ 14.8 millions and the utilization rate was 99%.

PARTNERSHIP ENVIRONMENT

WHO collaborates actively with a range of development partners, the United Nations Country Team (UNCT), NGOs, Civil Society Organizations and Academia

COUNTRY CONTEXT

Ecuador has 24 provinces. It has a population of 18,19 million, with about 25 % of its population being aged 14 years or younger and diverse ethnic groups. Ecuador is a middle-income country with abundant supply of oil, mineral resources and primary agricultural products. As of 2023, its GDP per capita was US$6.533. The annual health budget for 2022 was 4.9% of the country's GDP. Central government is responsible for the health service delivery, alongside with the public and private network, including the Social Security Institute. Ecuador is committed to achieving the Sustainable Development Goals (SDGs) and contributing to the WHO's GPW Targets.

PROGRESS ON HEALTH OUTCOMES

The country has made measurable progress in health outcomes. Life expectancy increased from 72.1 years in 2000 to 77.6 years in 2024. Maternal mortality declined to 35.6 per 100,000 live births in 2023, which means a reduction of 5.6 points since 2022. Stunting prevalence of children under two years old dropped by 0.8 percentage points, from 20.1% in 2022 to 19.3% in 2023. Efforts are also underway to eliminate diseases such as malaria, rabies, and trachoma, and the recovery of the regular immunization schedule for children. However, adolescent pregnancy is still a public health problem, a total of 15% of live births are to teenage mothers in 2023. In addition, out-of-pocket health expenditures remain high, and geographical barriers hinder access to health services, particularly in remote areas.

KEY CHALLENGES

Some key health challenges in Ecuador include reducing health inequities through an intersectoral approach addressing social and environmental determinants, while promoting healthy behaviors and environments.; decreasing the disease burden and preventable deaths with comprehensive public health strategies; transforming the National Health System to ensure universal access to quality healthcare and strengthening the health sector's risk management capacities.

For more information visit the link: https://www.paho.org/ecu

OUR STRATEGIC PRIORITIES & DELIVERABLES



01 Contribute to the development of a resilient National Health System (NHS) to achieve universal health access and coverage.

STRATEGIC DELIVERABLES

- Strengthen the leadership, regulation, governance, and financial sustainability of the National Health System (NHS).
- Contribute to increasing universal access to comprehensive and quality health services by implementing and enhancing the Family, Community, and Intercultural Comprehensive Health Care Model.
- Strengthen the NHS's capacity to guarantee equitable access to essential medicines, vaccines, and other health technologies.
- Improve governance, management, and regulation of human resources in health to ensure the availability and proper distribution of competent health personnel
- Enhance the governance and capacities of the NHS for evidence-based decision-making, driving transformation initiatives.

EXPECTED OUTCOMES

- Improved performance of the system's essential health functions.
- Balanced human talent ratios.
- Improved accessibility and timeliness of health services.
- Increased coverage of services and essential medicines and increased perception of quality by users of health services provided by the NHS.

02 Strengthen intersectoral action on the social, economic and environmental determinants of health, with emphasis on vulnerable population groups, to reduce inequity and inequality gaps in health.

STRATEGIC DELIVERABLES

- Strengthening the capacities of the national health authority for an intersectoral approach to health across all public policies, emphasizing the reduction of inequity gaps through social protection measures across the life course
- Enhancing intersectoral and interinstitutional coordination and community participation to facilitate health promotion and peace-building processes.
- Building intersectoral and interinstitutional capacities to detect vulnerabilities and address, adapt to, and mitigate the impacts of environmental determinants and climate change.
- Strengthening the capacities of various levels of government and fostering social participation to promote healthy environments and lifestyles, as well as community-based care and the integration of individuals with mental health issues and substance abuse disorders.

EXPECTED OUTCOMES

- Reduced barriers and gaps in access to health care services by priority groups, vulnerable or multiply vulnerable populations, and those located in rural and marginal urban areas.

03 Promote the well-being and health of people throughout the life course through a comprehensive approach to health, the promotion of healthy lifestyles and disease prevention to reduce the burden of disease, disability and mortality.

STRATEGIC DELIVERABLES

- Promotion of healthy lifestyle habits and reduction of risk factors for both communicable and non-communicable diseases.
- Strengthening the National Health System's capacities to maintain and accelerate progress in the control and elimination of priority communicable diseases, using a "One Health" approach.
- Enhancing the NHS's ability to reduce disability and premature mortality due to non-communicable diseases (NCDs), trauma, and violence; preventing problematic use of psychoactive substances; and providing comprehensive care for mental health disorders.
- Strengthening the NHS's capacity to provide comprehensive care throughout the life cycle, with an emphasis on maternal and child health and sexual and reproductive health.

EXPECTED OUTCOMES

- Reduced prevalence of overweight and obesity; reduced consumption of tobacco, alcohol, harmful health products and psychoactive substances; reduction of IDD; and reduced transmission of diseases such as HIV, Chagas disease, leishmaniasis and others preventable through immunization, including pneumococcus, rotavirus, PRRS and COVID-19.

04 Strengthen national capacity for the management of natural and anthropogenic risks and future health emergencies and their impact on people's health.

STRATEGIC DELIVERABLES

- Strengthening national and local capacities to assess, prevent, and mitigate disaster risks from natural, anthropogenic, and health emergencies, as well as for rapid detection to ensure timely, efficient, and sustained responses to these events.
- Strengthening capacities for preparedness, response, and coordination of local, national, regional, and global actions in response to future pandemics or health emergencies.

EXPECTED OUTCOMES

- Response and mitigation plans elaborated, for future health emergencies and disasters caused by natural and anthropic hazards, contributing to the fulfillment of national impact goals on the reduction of mortality rates due to health emergencies and natural and anthropic hazards.

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