B. SUBREGIONAL ORGANIZATIONS

Introduction

1. Subregional technical cooperation is supported by Resolution CD45.R6 on the Regional Program Budget Policy, adopted by the 45th Directing Council in 2004. After adopting the resolution, subregional technical cooperation was included in budget policy to promote stronger collaboration between the Pan American Health Organization (PAHO) and integration processes in three subregions: the Caribbean, Central America, and South America.

2. The purpose of this document is to inform Member States about agreements and resolutions arising from integration mechanisms since the last report submitted in 2021 regarding public health-related agreements and resolutions within the framework of subregional integration processes of interest to the PAHO Governing Bodies. This document also covers progress made on activities that were part of cooperation agreements between PAHO and subregional integration entities.

3. Through the signing of specific agreements and memorandums of understanding, the Pan American Sanitary Bureau (the Bureau) currently provides technical cooperation to the subregional integration organizations mentioned below. This report shows new developments and progress made in the implementation of priority resolutions adopted by these integration bodies, as well as their relation to the activities and measures that the Bureau has supported.

Caribbean Integration Entities

Caribbean Community

4. The Caribbean Community (CARICOM), a grouping of 20 countries (15 Member States and five Associate Members) came into being in July 1973 with the signing of the Treaty of Chaguaramas, which defines a structure consisting of organs, bodies, and institutions. The relationship between PAHO and CARICOM is defined by a memorandum of understanding signed in 1983. The PAHO Subregional Program Coordination Office for the Caribbean is the Organization’s main interlocutor with CARICOM. Through its technical cooperation, PAHO supports the development and implementation of Caribbean Cooperation in Health, the functional cooperation strategy for health adopted by CARICOM Ministers of Health.
Conference of Heads of Government

5. Between March 2021 and February 2022, two regular meetings and one special meeting of the Conference of Heads of Government were held, where the Heads urged the following actions to be taken:

a) Regarding COVID-19:
   i. That equitable access to vaccines is ensured for the entire Caribbean.
   ii. That the CARICOM Secretariat continue to collaborate with CARPHA, the Pan American Health Organization (PAHO), regional nursing, medical and allied health professional bodies and institutions, to identify strategies and policy guidelines to address vaccine hesitancy, using an evidence-based approach.
   iii. That the CARICOM Secretariat mobilize resources to support the implementation of communications and other initiatives to address vaccine hesitancy at the regional and national levels.
   iv. That Member States continue to support the multi-sectoral and inter-sectoral regional public health response to the COVID-19 crisis.
   v. That a regional strategy for manufacturing vaccines in the Region be explored.

b) Regarding Anti-microbial Resistance
   i. That multi-sectoral AMR national action plans be established in line with the One Health approach including integrated AMR surveillance systems for the human, animal, plant and environmental sectors.

c) Regarding Climate Change
   i. That, post-COP26, Caribbean Member States work collectively with international institutions to obtain adequate financing to address climate change-related impacts, including the elaboration of adaptation plans.

Council for Human and Social Development

6. Annually, CARICOM convenes the Council for Human Social Development (COHSOD), which works to promote health, education, and living and working conditions in the subregion. COHSOD held its 41st meeting virtually in October 2021. At this meeting, it reviewed the latest available data on the COVID pandemic and considered public health measures to make the subregion safer for international travel and to ensure both access to and uptake of vaccinations to reach herd immunity. The meeting also reviewed measures to combat NCDs, in particular the development of Front of Package Labeling (FOPL) standards for the Caribbean. The meeting considered policy actions to strengthen human resources for health (including addressing vaccine hesitancy among health care workers), actions to strengthen climate resilient health systems in the
Caribbean, and options to strengthen Member State capacity to prevent and manage heart attacks.

Central American Integration Entities

Central American Integration System

7. The Central American Integration System (SICA) is the institutional integration framework of the Central American region. It was established on 13 December 1991 under the Protocol to the Charter of the Organization of Central American States (OCAS), or Tegucigalpa Protocol, signed by the States of Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama. Belize (2000) and the Dominican Republic (2013) joined later as full members.

8. SICA operates through various organs and secretariats, and the Bureau participates in several activities with some of them, especially those related to health, environment, social affairs, municipalities and communities, education, Afrodescendant populations, and indigenous populations. Most activities are jointly implemented with the Executive Secretariat of the Council of Ministers of Health of Central America and the Dominican Republic (SE-COMISCA) and the Central American Commission on Environment and Development (CCAD).

9. On 12 March 2020, a statement on the COVID-19 pandemic was issued by the heads of State and Government of Belize, Costa Rica, the Dominican Republic, Guatemala, Honduras, Nicaragua, and Panama: "Central America united against the coronavirus" requested that SICA Member States adopt the necessary actions to control the pandemic, working within the framework established by PAHO and the World Health Organization (WHO) to advance measures to contain, reduce, and control COVID-19.

Council of Ministers of Health of Central America and the Dominican Republic

10. The Council of Ministers of Health of Central America and the Dominican Republic (COMISCA) is part of SICA and its purpose is to identify and prioritize health issues in the subregion. COMISCA normally convenes every six months and is the main subregional forum for analysis, deliberation, and presentation of proposals by the health ministers. Its current strategic plan for the period 2018–2021 is being updated; the new plan is expected to be available in the first half of 2022. Additionally, its framework is guided by the SICA Regional Health Policy 2015–2022 and the Health Plan for Central America and the Dominican Republic 2021–2025.

11. On 1 October 2019, the Health Cooperation Strategy was formalized between the parties, establishing work to be done by 2025. This strategy is based on the cooperation agreement between the Bureau and the SICA General Secretariat signed in 1995, and the cooperation agreement with COMISCA formalized in December 2017. In 2019, the Bureau opted to change the cooperation modality and reduce the subregional structure while maintaining the cooperation program for this subregion.
Virtual Regular Meetings of the Council of Ministers of Health

12. The 54th Regular Meeting of COMISCA was held virtually on 17-18 June 2021, with Costa Rica assuming the pro tempore presidency. At this meeting, the new Health Plan for Central America and the Dominican Republic 2021–2025 was approved. In relation to this plan, it should be noted that SE-COMISCA included the issues of regional response capacity to address climate change, as well as initiatives to promote population and environmental well-being, with the principle of gender equality. At this meeting, the new Executive Secretary was elected for the period from July 2021 to June 2025. Costa Rica assumed the pro tempore presidency for the first semester of 2021.

a) COMISCA Resolution 02-2021: Approval of the Health Plan for Central America and the Dominican Republic 2021–2025, which is presented as the strategic technical instrument to operationalize the SICA Regional Health Policy 2015-2022. This plan's approach incorporates analysis of inequalities in the social determinants of health, universal access and universal health coverage, and the Sustainable Development Goals.

b) COMISCA Resolution 03-2021: Approval of the final report of the Regional Study on Equity and Fertility in Adolescents in Central America and the Dominican Republic, carried out by the Bureau, the United Nations Population Fund (UNFPA), the countries' technical teams, and SE-COMISCA. SE-COMISCA was requested, with the collaboration of PAHO, UNFPA, and other cooperation partners, to support countries in implementing the recommendations arising from this study.

c) COMISCA Resolution 04-2021: The roadmap for SICA's regional implementation of the Strategy and Plan of Action on Health Promotion in the Context of the Sustainable Development Goals 2019–2030 (Document CD57/10 [2019]) was approved and SE-COMISCA was instructed to develop coordination with the ministries and secretariats of health of Central America and the Dominican Republic, as well as the specialized technical group on health promotion, for socialization of the roadmap, validation of targets, and identification of potential sources of financing, with PAHO support.

d) COMISCA Resolution 05-2021: Approval of the proposal to realign activities of the Mesoamerican Public Health System and the Mesoamerica Integration and Development Project (Mesoamerica Project), in order to avoid duplication of actions and competition for partners and potential projects. SE-COMISCA was instructed to develop a work plan in this regard, together with the Executive Directorate of the Mesoamerica Project.

e) COMISCA Resolution 06-2021: Approval of the Strategy for Comprehensive Management of Disaster and Emergency Risk from the Perspective of Health in Central America and the Dominican Republic, in order to prevent, mitigate, and respond in a timely manner to the needs of vulnerable population in the countries of the region. SE-COMISCA was requested to support countries in the implementation of the strategic lines of the strategy, with the support of PAHO,
Centers for Disease Control and Prevention (CDC) of the United States of America, and other cooperation partners.

f) COMISCA Resolution 07-2021: Approval of the Regional Strategic Plan for HIV 2021–2026 and the Regional Strategy for Sustainability of the HIV Response in Central America 2021–2026, in order to achieve a sustainable response and meet the targets in order to end the human immunodeficiency virus (HIV) epidemic by 2030.

13. The 55th Regular Meeting of COMISCA was held virtually on 9-10 December 2021, with Guatemala assuming the pro tempore presidency. This meeting analyzed the proposal for the new SE-COMISCA Strategic Planning 2022–2025 and adjustments to COMISCA Regulation 01–2017, regarding the organization and operation of COMISCA and its Executive Secretariat.

a) COMISCA Resolution 15-2021: In relation to the evaluation of capacities to implement the International Health Regulations in Central America, there was an expressed need to conduct joint external evaluations and to request that CDC and PAHO provide technical and financial support for Member States that had not yet carried them out.

14. Panama assumed the pro tempore presidency of COMISCA for the first semester of 2022. In the second semester, this will be assumed by the Dominican Republic.

Central American Commission on Environment and Development

15. The Central American Commission on Environment and Development (CCAD) was established with the mission of developing a regional regimen of cooperation and environmental integration that contributes to improving the quality of life of the populations of its Member States. Its areas of work focus on environmental governance and it is responsible for coordination of the SICA Regional Environmental Framework Strategy 2021–2025 and the Regional Strategy on Climate Change. Within the framework of health and the environment, PAHO and CCAD have been working jointly in the construction of these strategic plans addressing air quality, climate change, and health.

16. Meetings of liaison officers from CCAD and the Council of Ministers of the Environment were held on 16-17 February 2022. A memorandum of understanding between PAHO and CCAD established the basis for cooperation between the two organizations on joint activities that favor innovation and help to strengthen capacities and actions on health and environmental issues in the SICA subregion. In this regard, the following areas of cooperation have been identified: climate change, chemical safety, air quality, and water quality.

Mesoamerican Integration and Development Project

17. The Mesoamerica Integration and Development Project, or Mesoamerica Project, is a mechanism created by 10 Mesoamerican countries (Belize, Colombia, Costa Rica,
Dominican Republic, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, and Panama). Its purpose is to strengthen regional integration and promote economic and social development in the participating countries. The Mesoamerica Project operates through the joint work of the permanent presidency, held by Mexico, and the rotating semi-annual pro tempore presidencies of the other countries. The project was officially established by the presidents and heads of state and government at the Tenth Tuxtla Dialogue and Agreement Mechanism Summit (2008), focusing on two axes: one economic and the other social. The latter addresses public health, risk management, food safety, and housing issues, among others. El Salvador assumed the pro tempore presidency in the first semester of 2021, and Honduras in the second semester of the year. Nicaragua held the position during the first semester of 2022.

Executive Commission of the Mesoamerica Project

18. The Executive Commission of the Mesoamerica Project is composed of the presidential commissioners and the commissioner designated by the Prime Minister of Belize. The primary functions of the Executive Commission are to ensure that the objectives of the Mesoamerica Project are met, to submit proposals to the governments, and to monitor Mesoamerica Project activities. The Commission is the political and administrative arm of the Executive Directorate.

19. In the first meeting of the Executive Committee in 2021, held virtually on 19 February, Colombia shared the country’s experience on COVID-19 vaccination.

20. At the second meeting of the Executive Committee, held on 28 June 2021, the progress of actions carried out in the first semester was analyzed, and the 13th anniversary of the Mesoamerica Project was commemorated. The progress of cross-border agreements within the framework of the Regional Malaria Elimination Initiative was addressed. Honduras assumed the pro tempore presidency on 1 July 2021.

21. At the third meeting of the Executive Committee, held on 22 September 2021, Honduras presented details of a proposed cycle of sessions to exchange experiences of the secretariats and ministries of Health in the implementation of national COVID-19 vaccination plans and coordination of the Mesoamerican Network for Comprehensive Risk Management.

22. At the fourth meeting of the Executive Committee, held on 20 December 2021, the results of the second phase of the Healthy, Safe, and Sustainable Mobility project in the countries of the Mesoamerican Public Health System were presented, as well as the joint initiative with SE-COMISCA in relation to COVID-19 in Central America and Mexico.

Mesoamerican Public Health System

23. The purpose of the Mesoamerican Public Health System (SMSP) is to respond to the main common challenges in public health and to strengthen national health systems through selected interventions and operational support provided by the Mesoamerican
Institute of Public Health. Priority has been given to work on health issues such as road safety and progress with the Regional Malaria Elimination Initiative in the Central American region, as well as support for governmental systems in the management of information on the COVID-19 pandemic. The latter issue prioritizes sharing information produced by PAHO and WHO to fight the pandemic.

24. On 20 October 2021, Mesoamerican countries and different entities that support health issues in Mesoamerica shared experiences on national COVID-19 vaccination plans. Sessions were scheduled between the countries over three working days, with the aim of sharing experiences, good practices, and the measures adopted by the member countries of the Mesoamerican Public Health System and COMISCA.

South American Integration Entities

Andean Community: Andean Health Agency-Hipólito Unanue Agreement

25. In the Andean Integration System, the Andean Health Agency/Hipólito Unanue Agreement (ORAS-CONHU) acts as executive secretariat for the Meeting of Ministers of Health of the Andean Area (REMSAA). PAHO participates in these meetings as the technical advisory agency on health. An umbrella memorandum of understanding was signed between PAHO and ORAS-CONHU on 16 March 2017 and then extended in 2019. PAHO's Subregional Program for South America is the Organization's main interlocutor with ORAS-CONHU and, through its technical cooperation, supports the development and implementation of the recently approved strategic plan for health integration. The PAHO Strategic Plan 2020-2025 is in complete accordance with the ORAS-CONHU strategic plan for health integration for 2018-2022. The 39th meeting of REMSAA was held virtually on 11 June 2021. In this meeting, the Minister of Health of Chile handed over the pro tempore presidency to Ecuador.

26. Several resolutions were adopted at this meeting, including the following:

a) Resolution REMSAA XXXIX/546, approving the formation of the Andean neonatal health working group, which is in charge of preparing a work plan on the subject for the Andean region.

b) Resolution REMSAA XXXIX/547, approving the creation of the Andean Intersectoral Roundtable for Agreements against Health Inequalities, aimed at promoting the creation of a regional monitoring system with emphasis on reducing social inequalities in health.

c) Resolution REMSAA XXXIX/548, which calls for strengthening mental health services by allocating more resources and facilitating access to these services for the population.

d) Resolution REMSAA XXXIX/549, which approves amendments to the regulations governing the organization and functions of ORAS-CONHU in order to ensure that activities are carried out according to the new work system.

e) Resolution REMSAA XXXIX/550, approving the procedure for hiring consultants.
f) Resolution REMSAA XXXIX/551, approving the 2020–2021 management reports and the audited 2020 report.

**Southern Common Market: Meeting of Health Ministers and Working Subgroup 11 "Health"**

27. The highest sectoral body in this area of cooperation is the Meeting of Health Ministers of the Southern Common Market (MERCOSUR), comprising Argentina, Brazil, Paraguay, and Uruguay. The other countries of South America are Associate States. The working subgroups are technical bodies made up of representatives of the States Parties to MERCOSUR. Their main objective is to formulate common regulations and harmonize national standards in the member countries in each area of jurisdiction. The main purpose of Working Subgroup 11 "Health" is to harmonize strategic policies linked with public health and align them with regional priorities, and to develop plans and programs of action for joint implementation.

28. An umbrella memorandum of understanding was signed between PAHO and MERCOSUR on 11 June 2015 and was renewed in 2019. New issues were included for which PAHO can provide technical cooperation. The PAHO Strategic Plan 2020-2025 is entirely coherent with the thematic areas defined in the memorandum of understanding. During the first semester of 2021, under the pro tempore presidency of Argentina, the 48th Meeting of Health Ministers of MERCOSUR was held virtually on 15 June. At the meeting, the pro tempore presidency was transferred to Brazil. Subsequently, on 19 November 2021, in Foz do Iguaçu (Brazil), the 49th Meeting of Health Ministers of MERCOSUR was held and the pro tempore presidency was transferred to Paraguay.

29. At the 48th Meeting of Health Ministers of MERCOSUR on 15 June 2021, the epidemiological status of the region in relation to COVID-19 was presented and the following statements were reviewed and approved:

   a) Declaration of the Health Ministers of MERCOSUR and the Plurinational State of Bolivia on the "Need to maintain active donation and transplantation of organs, tissues, and cells during the COVID-19 pandemic".

   b) Declaration of the Health Ministers of MERCOSUR and the Plurinational State of Bolivia on the "MERCOSUR Registry of Donation and Transplantation – DONASUR".

   c) Declaration of the Health Ministers of MERCOSUR and the Plurinational State of Bolivia on "Strengthening World Health Organization (WHO) preparedness and response to health emergencies".

   d) Declaration of interest of the Health Ministers of MERCOSUR and the Plurinational State of Bolivia in relation to the webinar on "Advances and challenges in addressing antimicrobial resistance in MERCOSUR".

30. At the 49th Meeting of Health Ministers of MERCOSUR on 19 November 2021, the epidemiological status of the region in relation to COVID-19 was also presented and the following agreements and declarations were approved:

a) Agreement 05/21, on "Health surveillance, promotion, and care for the prevention and control of noncommunicable diseases in MERCOSUR".

b) Agreement 06/21, on "Promotion of a healthy school environment".

c) Declaration by the Health Ministers of MERCOSUR and the Plurinational State of Bolivia on the need to expand regional productive capacity for medicines, immunization, and health technologies.

*Forum for the Progress and Integration of South America*

31. The Forum for the Progress and Integration of South America (PROSUR) is a mechanism and a forum for dialogue and cooperation among all South American countries aimed at more effective integration that promotes the growth, progress, and development of South American countries. Its highest sectoral body is the Meeting of Health Ministers of PROSUR. Currently, eight South American countries have signed the forum's charter: Argentina, Brazil, Chile, Colombia, Ecuador, Guyana, Paraguay, and Peru. On 27 January 2022, the PROSUR Presidential Summit was held in person in the city of Cartagena de Indias, Colombia.

32. The heads of state and government at the summit reaffirmed their commitment to the consolidation of PROSUR and acknowledged the value of the bloc's response to the COVID-19 pandemic by opening a space for dialogue, cooperation, and regional coordination. The presidential statement placed special emphasis on the health group's progress in boosting cooperation and strengthening health security among countries. The project "Scaling up immunization capacities in PROSUR countries" was highlighted. The main results of the project are a diagnosis of regional capacities for vaccine production and regional demand for pandemic and routine vaccines, as well as the identification of key areas in which to strengthen these capacities at the national and regional levels. Experiences were also shared regarding vaccination plans and digital vaccination certificates, highlighting the subregion's successes and challenges in the current health emergency. Efforts to promote the establishment of a network of health observatories for epidemiological surveillance were also recognized. The importance of resuming work on healthy aging and the digital transformation of health by 2022 was highlighted.

33. Finally, the pro tempore presidency of PROSUR was transferred from Colombia to Paraguay, which will hold it until December 2022.

*Action by the Executive Committee*

34. The Executive Committee is invited to take note of this report and provide any comments it deems pertinent.