

PAHO/WHO Sub-regional Cooperation Strategy for the Caribbean SUMMARY



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1. Background

PAHO/WHO Sub-regional Technical cooperation presence is aimed at meeting the needs of a group of countries in their pursuit of the sub-regional health development goals within the framework of the collective mandate of the Organization. This programmatic level was officially established and introduced for the 2006 – 2007 biennium as stipulated in the PAHO Regional Program Budget Policy approved by the 45th Directing Council. The sub-regional technical cooperation program serves as support to the health action plans of the various sub-regional integration processes in the Americas.

The aim of the Sub-regional cooperation strategy (SCS) in the Caribbean is to define PAHO/WHO sub-regional presence and programs in the light of the Regional Budget Policy and guide the strategic direction of the Cooperation in the medium term 2010 - 2015. The development of the Strategy will:

- redefine PAHO WHO sub-regional presence and programs in light of the Regional Program Budget Policy
- Respond better to sub-regional frameworks and initiatives: Nassau Declaration, Caribbean Cooperation in Health (CCH), Port-of-Spain Declaration on Non-Communicable Diseases, CARPHA etc
- Address new challenges: International Health Regulations IHR, pandemics, climate change
- Provide an opportunity for open dialogue between PAHO/WHO and the key partners regarding strategic plans and issues in public health.
- Allow for alignment with the sub-regional health agenda; fulfillment of global, regional, and sub-regional mandates and harmonization with other partners.
- Increase the efficient and effective use of limited resources because neither PAHO or WHO can address every issue on the unfinished health agenda
- Minimize the chances of overlap, duplication and gaps in initiatives of PAHO and partners
- Guide the development of PAHO-WHO Sub-regional biennial work plans during this period [BWP]
- The SCS will guide mobilization of resources

2. PAHO/WHO PRESENCE IN THE CARIBBEAN

PAHO support to the Caribbean is country focused with representations serving each of the countries as well as sub-regional focused.

2.1. **Country focused Cooperation:** Representations in the following countries:

- Trinidad and Tobago;
- Suriname;
- Haiti;
- Belize;
- Guyana;
- Bahamas covering Turks and Caicos Islands;
- Jamaica covering Bermuda & Cayman Islands
- Barbados and the Eastern Caribbean

Each country has its own budgetary allocation based on the PAHO Regional Budget Policy.

2.2. **Sub-regional Focused Cooperation:**

The Caribbean sub-regional program supports the following entities:

- The Office of the Caribbean Program Coordination (OCPC)
- The Office of the Eastern Caribbean Countries (OECC)
- Caribbean Epidemiology Centre (CAREC)
- Caribbean Food and Nutrition Centre (CFNI)

Program on HIV/AIDS Caribbean Office (PHCO) supports the Caribbean, but budget is not within the Sub-regional allocation

In line with the Sub regional support, the Organization identified the need for enhanced technical cooperation to the sub-regional integration processes in the Caribbean with the rapid progress in the development of the Caribbean Single Market and Economy and the clear commitment of the countries to reduce their vulnerability by working together. To this end, the Office of the Caribbean Program Coordination was re-structured in 2006 to focus on the sub-regional integration processes of the Caribbean and coordinate the work of the sub-regional entities.

Support to the countries and sub-region is also provided by the Regional Office and the World Health Organization. PAHO also has centres in which scientific and technical resources to address one or more related areas are concentrated to support the needs of all countries and the Caribbean benefit from these resources.

3. DEFINING THE STRATEGIC AGENDA FOR PAHO TECHNICAL COOPERATION

3.1. Methodology

The CARICOM Caribbean Cooperation in Health 111 endorsed by the Health Ministers of the Caribbean and Heads of Governments in 2009 is the framework for the health agenda for the Caribbean. The CCH 111 was used as the basis for identifying priorities for PAHOs cooperation in the Caribbean. These priorities were aligned to the PAHO Strategic Plan. The mission team identified by the Director of PAHO was led by the Caribbean Program Coordinator. Based on 1) a review of the situation analysis and various planning documents in the Caribbean and internationally, 2) feedback from stakeholders on the present work in the Caribbean, the mission team prepared a draft plan defining:

- the priorities for PAHOs cooperation based on selected criteria,
- which PAHO entity would take the lead in implementation and
- how PAHO would deliver its technical cooperation.

3.2. Priorities for Technical Cooperation

3.2.1. The priorities for technical cooperation are listed in Annex 1.

The criteria for determining the priorities were:

- Intervention identified as priority for joint action within the CCH 3 framework and PAHO/WHO Strategic Plan
- Intervention would have positive impact in addressing the health issues associated with the integration process
- Lack of PAHO/WHO support would be a barrier to Sub-regional integration
- Intervention best coordinated at sub-regional level due to economies of Scale
- Interventions relevant to the Caribbean, on Global and PAHO Strategic Agendas which contribute to CCH3 goals

3.2.2. Which PAHO entity to take lead in the implementation

Recognizing that each PAHO entity in the sub-region had a different focus and mandate, the lead PAHO entity, and supporting entity was defined for each intervention. The role of non PAHO entities were also identified and recognized in addressing the interventions.

3.2.3. Mechanisms for Cooperation

1. Providing Leadership on matters critical to health and engaging in partnerships where joint action is needed
2. Shaping the research agenda and stimulating the generation, translation and dissemination of valuable knowledge
3. Setting norms and standards and promoting and monitoring their implementation
4. Articulating ethical and evidence-based policy options

5. Providing technical support, catalyzing change and building sustainable development
6. Monitoring the health situation and assessing health trends
7. Promoting South to South Cooperation and technical cooperation between countries
8. Supporting resource mobilization efforts

4. IMPLICATIONS OF THE SUB-REGIONAL COOPERATION STRATEGY:

The following are the main conclusions and implications of the PAHO sub-regional Cooperation Strategy:

1. The priorities identified in the strategic planning exercise validates the work undertaken in the sub-regional entities since 2006 with the focus on strengthening core functions in the case of the two PAHO Centres and the OCPC focusing on the public health implications of the CSME.
2. The main modalities in order of priority for cooperation at the sub-regional level are:
 - To provide leadership critical to health and engaging in partnerships where joint action is needed
 - Setting norms and standards and promoting and monitoring their implementation
 - Monitoring the health situation
 - Promoting South to South cooperation
3. It was recognized that in order for PAHO to implement the strategic agenda, it will be necessary for:
 - PAHO to undertake re-profiling of the technical capacity at the Sub-regional level.
 - To mobilize resources to accelerate implementation of the priority interventions
4. With the establishment of the Caribbean Public Health Agency in 2010, PAHO will need to establish mechanisms to review its cooperation based on the implementation of the Agency

Caribbean Public Health Agency (CARPHA)

The CARICOM Heads of Government have agreed to establish a new Public Health Agency which involves absorbing the functions of the existing three Regional Health Institutions as well as the two PAHO administered centers namely CAREC and CFNI.

Stage 1: Definition of agency, its role, functions and governance. During this period PAHO provided direct technical support to the project management team, steering/advisory committee, to assist in finalizing definitions. During this stage, both PAHO centers strengthened their capacity in their core functions to be in the best position for optimal and quality transfer to the new agency when it is established. PAHO will continue to support the two Centres until the legal transfer of the Centres to CARPHA. During this stage PAHO's technical cooperation was lead by the OCPC with support from the Regional Office.

Stage 2: Transition phase of existing PAHO agencies into CARPHA. CARICOM Implementation Team established in Trinidad and Tobago

During this phase:

- PAHO will present the imminent change in status of the PAHO/WHO Centres to the Executive Committee and Directing Council
- PAHO/WHO will support the Implementation Management Team in further refinement of the costing exercise for CARPHA using the examples of upgraded laboratories in the Caribbean e.g. Suriname, Guyana and Barbados
- Support CARPHA in defining mechanisms to address the disparities in capacity and reduce asymmetries among countries
- Assist in defining role for CARPHA in South to South cooperation
- Facilitate the transfer of knowledge from PAHO on recruitment mechanisms for the search for the Executive Director of CARPHA and the Implementation Management Team
- PAHO will re-profile itself relative to the stated roles, functions and levels of implementation of the CARPHA.
- PAHO will negotiate with CARICOM/CARPHA to determine the new dimensions of technical cooperation (financial, technical, Human Resource)
- PAHO will continue to maintain the current level of services provided by the centers until the final legal transfer to CARPHA.
- PAHO will establish the administrative and legal instruments and mechanisms for the formal transfer of CFNI and CAREC to CARPHA.
- PAHO will determine how to support services currently being provided by CFNI that will not be incorporated into CARPHA

Stage 3: Legal Establishment of CARPHA.

During this phase PAHO will provide support to build capacity in the new agenda.

5. MECHANISMS FOR STAKEHOLDER ENGAGEMENT DURING IMPLEMENTATION:

Progress on the implementation of the Sub-Regional Biennial Work Plan (including the work of the Centres until they are incorporated into CARPHA) presented to the meeting of Chief Medical Officers annually.

Progress on the Implementation of Strategy presented at the CAUCUS of Ministers of Health meeting annually.

ANNEX 1

PAHO STRATEGIC PRIORITIES FOR COOPERATION IN THE CARIBBEAN IN LINE WITH CCH3 STRATEGIC PROJECTS

CREATION OF A HEALTHY CARIBBEAN ENVIRONMENT CONDUCTIVE TO PROMOTING THE HEALTH OF ITS PEOPLE AND VISITORS

Support implementation of primary prevention, interventions that reduce environmental health risks, enhance safety, and promote public health including in specific setting and among vulnerable population groups e.g. children, older adults, disabled

- Development of core indicators and Framework for Health Promoting Schools in the sub-region and strengthening of the Health Promoting School Network.
- Development of guidelines in various Caribbean settings which impact on the population's health namely schools, workplaces, home and recreation facilities.

Enhance Health sector leadership to promote a healthier environment and influence public policies in all sectors to address the root causes of environmental threats to health by responding to emerging and re-emerging environmental health concerns from development, evolving technologies, global environmental change, as well as consumption and production patterns.

Support the CARICOM Regional Health Institutions, Tertiary Level Institutions and Civil Society to:

- develop a Regional Environmental Health Strategic Plan (using a risk assessment approach)
- Support the development of regional guidelines, strategies and tools to promote environmental health awareness

Support the development and strengthening of emergency preparedness plans and programs at sub-regional level including in the areas of recovery and risk reduction such as communicable diseases, mental health, health services and food safety.

Support capacity building at the sub-regional level to achieve core capacities required by the International Health Regulations for the establishment and strengthening of alert and response systems for the use in epidemics and other public health emergencies of international concern and support countries to detect, contain and effectively respond to major epidemic and pandemic prone diseases

Form partnerships and alliances, build leadership and develop coordination and networking mechanisms with all stakeholders at regional and global levels to promote advocacy and communication, stimulate inter-sectoral actions and increase investment in nutrition, food safety and food security.

- Support the development of inter-sectoral policies with agriculture, trade and marketing to develop mechanisms to assure that healthy foods are available at affordable prices. This includes issues of food safety.
- Ensuring/establishing regional nutritional and quality criteria for imported local and imported foods as part of trade policy which would include standards for labeling.

IMPROVED HEALTH AND QUALITY OF LIFE FOR CARIBBEAN PEOPLE

To maximize equitable access of all people to vaccines of assured quality, including new or underutilized immunization products and technologies, strengthen services and integrate essential family and child health interventions with immunization

- Support the sub-region to maintain and improve the high levels of immunization rates for vaccine preventable diseases and assess the feasibility of introducing new vaccines in the sub-region with the emphasis on HPV for the prevention of cervical cancer.

Promote evidence based and ethical policies, strategies, programs and guidelines for reducing unhealthy diets, physical inactivity promote safer sex

- Support the sub-region in the implementation of the Port of Spain Declaration on “Uniting to Stop the Epidemic of Non-Communicable Diseases”.
- Development of Regional nutritional standards and guidelines for food sold in school premises and other settings

Develop comprehensive policies, plans and strategies that promote universal access to a continuum of care throughout the life course; to integrate service delivery; to strengthen coordination with civil society, the private sector and partnerships with UN and Inter-American system agencies and others viz. NGOs

- Support the development of an integrated regional plan in the Caribbean for adolescent health, health of the elderly.
- Support the development of models of care and sharing of practices in the sub-region which promote integrated care for the elderly, and the physically and mentally challenged.
- Support the development of a sub-regional plan to address the challenges of violence and injuries reduction
- Support the implementation of the Caribbean Regional Strategic Framework for HIV/AIDS
- Support the development of a Mental Health Policy for the sub-region

HEALTH SERVICES RESPOND EFFECTIVELY TO THE NEEDS OF THE CARIBBEAN PEOPLE

Support development and modimplementation of service delivery policies to reflect the Primary Health Care approach

Support the strengthening of health and social systems for the integrated prevention and management of chronic non-communicable conditions, mental and behavioral disorders, violence, road traffic injuries and disabilities

- Support development/review of protocols and standards of care in mental health, NCDs and other priority diseases in the CCH 111.
- Review and assess the feasibility of developing a mechanisms for shared services in the Caribbean

Promote equitable access to quality health care services, with special emphasis on vulnerable population groups.

- Support development of Caribbean Quality Management and Accreditation Framework including Patient Charters
- Support the development of a network of national centres of excellence in laboratory and public health
- Support implementation of the Caribbean HIV/AIDS Plan for the Health Services

Support the development and monitoring of comprehensive sub-regional policies on access, quality and rational use of essential public health supplies including medicines, vaccines, blood products medical devices and health technologies

- Support the design and implementation of a Caribbean Pharmaceutical Policy and mechanisms to enhance access, quality and rational use of medicines in the Region;

- Support the strengthening and the harmonization of pharmaceutical regulation, including Pharmacovigilance;

DEVELOPING HUMAN RESOURCES CAPACITY TO SUPPORT INFRASTRUCTURE DEVELOPMENT

Support provided to develop plans, policies and regulations of human resources at the sub-regional level to improve the performance of health systems based on primary care and the achievement of the MDGs.

- Support the development of a Regional Strategic plan for health human resources developed
- Support the development of the infrastructure to enable the free movement of skilled health personnel in the CARICOM Region
- Development of a Regional Health Profession Registration Database
- Models and frameworks of transectoral policies and protocols for health workforce planning
- Develop mechanism for coordination of schools of public health in the Caribbean for the strengthening of research and training in public health.
- Enhanced coordination of schools of medicine, nursing, pharmacy and allied health professions in the Caribbean to strengthen the training in the health professionals to meet the health and development needs of the CARICOM Region
- Develop mechanisms for coordination of the health services and the Caribbean academic institutions to work cooperatively in human resource planning and the development of human resources management programs as part of the curricula
- Regionally accepted competencies in the health workforce for primary and secondary prevention, quality health and health care with particular emphasis on the CCH3 priority areas
- Initiatives and strategies developed to support the expansion of residency training programs that focus on primary care and chronic disease prevention and management
- Development of a human resource plan for mental health programs: The plan should include curriculum development at pre-service level, continuing education for mental health care professionals and a module addressing integration of mental health management and care into primary health care systems.
- Curriculum development at pre-service level, CPD and integration of mental health management including substance abuse and care into Primary health care systems

EVIDENCE BASED DECISION MAKING

Working with partners, support the collection, collation and analysis of Social and economic data relevant to health on a disaggregated basis (by sex, ethnicity income and health conditions, such as disease or disability).

- Support the dissemination of Evidence based assessments, norms and guidance on priority environmental health risks, e.g. air quality, chemical substances, drinking water, waste water re-use

Enhance capacity to carry out surveillance for communicable and non-communicable diseases, behaviour risk factors, zoonotic and non-zoonotic food-borne disease as part of a comprehensive surveillance and health information system, risk factor surveillance through dissemination of tools, validation of frameworks, and operating procedures and their dissemination

- Support the development of a Caribbean Health Information System supported by a regional health information network
- Support the establishment of baseline data for the CCH111 priorities and support for countries' capacity to collate, analyze data and prepare situation analysis
- Review guidelines for the surveillance of selected communicable diseases, vector borne diseases, nutrition and environmental hazards

Support capacity building at sub-regional level to analyze, disseminate and use data on the magnitude, causes and consequences of chronic non-communicable conditions, mental and behavioural disorders, violence, road traffic injuries and disabilities, sexual and reproductive health, HIV and TB