



*directing council*

PAN AMERICAN  
HEALTH  
ORGANIZATION

XXXI Meeting

*regional committee*

WORLD  
HEALTH  
ORGANIZATION

XXXVII Meeting



Washington, D.C.  
September-October 1985

INDEXED

Provisional Agenda Item 29

CD31/20 (Eng.)

24 July 1985

ORIGINAL: SPANISH

PROMOTION OF TCDC/ECDC IN THE HEALTH SECTOR WITH THE COLLABORATION OF PAHO

In compliance with Resolution III of the XXX Meeting of the Directing Council of PAHO (1984), the Director presented to the 95th Meeting of the Executive Committee, for consideration, a report on the progress made by the Member Countries and the Pan American Health Organization in the use of technical cooperation among developing countries/economic cooperation among developing countries (TCDC/ECDC) (Document CE95/19, annexed).

In its discussion of the topic the Executive Committee was of the view that that report, though covering only a very early stage after the XXX Meeting of the Directing Council approved the Director's recommendations for the promotion of TCDC/ECDC in the health sector, is yet highly suggestive and offers a starting point for a new stage in the promotion of TCDC in the framework of the Organization.

It also recommended that coming reports provide an inventory as complete as possible of TCDC activities in the Region, and that they show what technical and administrative measures the Pan American Sanitary Bureau has adopted for their implementation.

The Committee acknowledged the Director's special emphasis on TCDC, as can be seen in the Organization's proposed program budget for the coming biennium, and noted that flexible administrative machinery and the systematic application of TCDC are key factors for success. It also recognized the importance of devising a methodology for proper evaluation of the process.

The Executive Committee decided to recommend to the XXXI Meeting of the Directing Council that it consider the following resolution:

THE 95th MEETING OF THE EXECUTIVE COMMITTEE,

Having seen the report presented by the Director on the progress made by the Member Governments in the use of technical and economic cooperation among developing countries (TCDC/ECDC) with the support of PAHO/WHO (Document CE95/19),

RESOLVES:

To recommend to the XXXI Meeting of the Directing Council that it adopt a resolution along the following lines:

THE XXXI MEETING OF THE DIRECTING COUNCIL,

Having considered the report presented by the Director on the progress made by the Member Countries in the use of technical and economic cooperation among developing countries (TCDC/ECDC) with the support of PAHO/WHO (Document CD31/20), and bearing in mind Resolution III of the XXX Meeting of the Directing Council (1984),

RESOLVES:

1. To urge the Member Governments and the Director to continue the appropriate steps alluded to in operative paragraphs 2 and 3 of Resolution III of the XXX Meeting of the Directing Council on the use of TCDC/ECDC.

2. To request the Director to report to the Governing Bodies of the Organization in 1986 on the progress made in the use of TCDC/ECDC by the Member Governments and the Organization.

*executive committee of  
the directing council*

PAN AMERICAN  
HEALTH  
ORGANIZATION



*working party of  
the regional committee*

WORLD  
HEALTH  
ORGANIZATION



CD31/20 (Eng.)  
ANNEX

95th Meeting  
Washington, D.C.  
June-July 1985

Provisional Agenda Item 24

CE95/19 (Eng.)  
7 May 1985

ORIGINAL: ENGLISH-SPANISH

PROMOTION OF TCDC/ECDC IN THE HEALTH SECTOR WITH THE COLLABORATION OF PAHO

Progress Report

In compliance with Resolution III of the XXX Meeting of the Directing Council of PAHO/WHO, the Director presents for consideration by the 95th Meeting of the Executive Committee a report on the progress made by the Member Countries and the Pan American Health Organization in the use of the Technical Cooperation Among Developing Countries/Economic Cooperation Among Developing Countries (TCDC/ECDC).

The present document describes examples of the use of TCDC/ECDC mechanisms in programs and activities among countries and in the Organization's regional programs.

These examples show how these mechanisms for international cooperation (TCDC/ECDC) are figuring increasingly in the solution of common health problems of member countries as indicated in the Regional Strategies and the Plan of Action for HFA/2000.

## PROMOTION OF TCDC/ECDC IN THE HEALTH SECTOR WITH THE COLLABORATION OF PAHO

Introduction

The first example to be cited on the regional level is the support given by the Directing Council of PAHO in its XXX Meeting to the proposal presented by the Secretariat on Guidelines for the Promotion of Technical and Economic Cooperation Among Developing Countries (TCDC/ECDC) in the Health Sector (Document CD30/15), proposing measures to stimulate, facilitate, and systematize the use of TCDC/ECDC. In that meeting, the Directing Council reiterated to the Member Countries the urgency of taking in each of them institutional, legal, administrative, and financial steps to facilitate collective and bilateral action in the health field.

It may be noted that it is only recently that the recommendations contained in that Secretariat document have begun to be implemented. It may be noted, however, that the countries are becoming increasingly interested in using TCDC/ECDC, and that the process is steadily advancing with the support of PAHO/WHO's programs and its adoption of administrative and financial measures.

Examples of TCDC Activities:Priority Health Needs Plan in Central America and Panama

The Central American Region is enduring one of the most profound social, economic, and political crises in its history. Although the countries are committed to the social objectives of health for all by the year 2000, the present crisis has reached such proportions that the social sectors including health, are having difficulties maintaining past levels of social development.

The plan "Priority Health Needs in Central America and Panama" seeks to mobilize national and external resources on behalf of the most vulnerable sectors of the population, particularly children, the rural and urban poor and those displaced by the current violence, striving to satisfy basic needs and to contribute to the well-being of the people.

The Central American countries with the support of PAHO/WHO and UNICEF formulated this plan, through the exercise of what could be stated as the best example of a TCDC effort. Nearly 200 national experts worked together through the period of one year identifying priority areas of action, and formulating the national and intercountry projects comprised in the Plan.

### Andean Group

PAHO has continued to collaborate with the Hipólito Unanue Agreement formed by the five Andean Countries: Bolivia, Colombia, Ecuador, Peru, and Venezuela. During 1984, special emphasis was given to the area of pharmaceuticals in two main fields of action: a) training in drug supply management, through a series of national and inter-country courses, and b) development of subregional information system on drug registration.

### Caribbean Community (CARICOM)

PAHO and its Centers in the subregion, the Caribbean Epidemiology Center (CAREC), and the Caribbean Food and Nutrition Institute (CFNI), are promoting and utilizing TCDC through its programs and activities in the English-speaking Caribbean Countries.

Examples of programs in which TCDC has become the main mechanism of action in this subregion are the Program on Training of Allied Health Personnel Program, and the Regional Educational Program for Training of Animal Health and Veterinary Public Health Assistants. In both cases, funding has been provided by UNDP and technical and administrative support given by PAHO. The participation of the countries in conducting the programs has progressively increased, and the overall management responsibility of the programs is being transferred to the participating countries themselves and CARICOM.

### Collaboration with Other Intergovernmental Organizations

During the year working agreements were signed with the Latin American Institute for Economic and Social Planning (ILPES) and the Latin American Economic System (SELA) for the sharing of experiences in TCDC/ECDC and collaboration in bilateral and regional projects with the adoption of appropriate operating mechanisms.

The Organization is working with ILPES on the development of a regional financial TCDC mechanism in the health field for the solution of the financing problems identified so far. It is hoped that this mechanism will complement the mobilization of national resources for TCDC and the funds allocated by PAHO for TCDC at the country level.

Under the working agreement with SELA, the Organization and that agency are engaged in a joint study of the pharmaceutical sector for presentation to the Meeting of High-level Government Experts (REGAN) in Foreign Trade to be held in July 1985. This meeting is expected to produce recommendations for the solution of the problems identified by the health sector in the area of the production, distribution, and availability of drugs.

### Bilateral TCDC

It will be recalled that in its XXX Meeting the Directing Council took note of the report presented by a working group consisting of officials of Argentina, Brazil, Colombia, Cuba, Mexico, and Venezuela, which examined the potential for TCDC/ECDC in each of those countries, both for meeting domestic health needs and for cooperating with other countries, and identified the most important obstacles, such as a lack of information on and knowledge of TCDC/ECDC, and financing difficulties. Brazil, Colombia, Cuba, and Mexico continued their studies to examine existing capacities and systematize the information thereon with a view to overcoming those restrictions. In addition, PAHO's Country Offices have begun an inventory and examination of bilateral agreements with a view to identifying TCDC activities in the health sector and steering PAHO support to them.

Despite the lack of systematic information on bilateral cooperation activities, some have been reported which are worth singling out as indicative of the potential for TCDC/ECDC that exists in the countries of the Region:

The National Virology Institute and National Reference Laboratory of Mexico have collaborated with Bolivia, Chile, Colombia, Guatemala, Honduras, Nicaragua, Panama, and Peru in verifying the stability and potency of the polio and measles vaccines used in the programs of those countries. Those establishments have also provided consulting services to Cuba in the production of measles and DPT vaccine and in the holding of a regional seminar on the control of vaccines against viruses. Inter-country activities for the quality control of reagents have taken place among Brazil, Chile, Cuba, and Mexico, and reagents have been provided to other countries in the Region, almost 900 having been sent to 11 requesting countries. In the same spirit, Argentina has offered to provide Trypanosoma cruzi antigen for the diagnosis of Chagas' disease.

Another example of bilateral TCDC in which PAHO has been involved from the beginning is the Nicaragua-Cuba-PAHO tripartite agreement for the development of human resources in Nicaragua. The program is in its last year and it will be evaluated in December 1985.

A similar agreement has been signed between Mexico and Cuba, where PAHO plays a supporting and facilitating role.

### TCDC and PAHO Programs

TCDC is being incorporated in all PAHO programs, as a main instrument for mobilizing national and regional resources. The following examples are noted:

### The Community Health Training Program for Central America and Panama (PASCCAP)

This program initially funded by UNDP has continued to operate through its network of national focal points, with a greater participation of the Ministries of Health of Central America and Panama.

The main activities of the program are: applied research, planning of health manpower, and development of formal training programs and/or continued education. PASCCAP is responsible of coordinating activities for the projects comprised in the priority area of Human Resources of the Central America and Panama Health Plan of Priority Health Needs.

### Educational Technology for Health Program

The program has promoted the establishment of a network of 23 national nuclei for Educational Technology for Health, which is progressively operating in the TCDC context for information exchange and training of health personnel.

### Health Administration Program (PROASA)

This program with financial resources from the Kellogg Foundation, has promoted the establishment of nine national nuclei for programs in training in advanced health administration. It is expected that this network will continue to operate in the TCDC context and support other national health programs and networks like in Maternal and Child Health Care.

### Latin American Center on Health Sciences Information (BIREME)

The Regional Library of Medicine with headquarters in Sao Paulo, Brazil, has been serving the Latin American Countries for over a decade. Its extension to other countries, and the development of national networks will begin in 1985, with funding provided by IDRC and UNDP. The countries involved in the first phase will be Argentina, Brazil, Colombia, Costa Rica, Chile, Mexico, Peru, and Venezuela. This network, of national nuclei will interact to feed the Latin American Medical Index, and will facilitate the exchange of scientific health information among countries.

### Pharmaceuticals

Another outstanding example of joint action is the initiatives on essential drugs. In addition to the aforementioned activities of the countries in the Andean group, Argentina, Brazil, and Mexico have agreed to engage in joint and complementary activities particularly in the production of raw materials for essential drugs. Also, worth mentioning is the joint formulation of a subregional essential drugs program by the countries of the Central American Isthmus.

### Pan American Centers

All Pan American Centers are progressively operating in a TCDC context. The Caribbean Epidemiology Center (CAREC) and the Caribbean Food and Nutrition Institute (CFNI) were cited above in regard to the English-speaking Caribbean countries. In the same way, the Institute of Nutrition of Central America and Panama (INCAP) serves the countries of the Central American Isthmus under the guidance of its council formed by the Ministries of Health of Central America and Panama and PAHO. The Center is responsible for cooperating in the development of the food and nutrition program formulated by the countries in the Central American Plan of Priority Health Needs.

The Pan American Center for Human Ecology and Health (ECO) and the Pan American Center for Sanitary Engineering and Environmental Sciences (CEPIS), in a broader regional scope, are also utilizing TCDC as a main instrument for technical cooperation, information exchange, and training. The Pan American Network for Information and Documentation in Sanitary Engineering and Environmental Sciences (REPIDISCA) is a well-established network. Initially funded by PAHO/CEPIS, is now operating by itself with a full interaction among its members.

The Pan American Foot-and-Mouth Disease Center (PANAFTOSA) in Rio de Janeiro, has been utilizing the TCDC concept for a number of years. At the present time most of the South American countries affected by this animal disease have developed laboratories and programs for its control. The Center remains as a reference center for diagnostic purposes and for research and training in close interaction with the national commissions for control of foot-and-mouth disease.

### General Comment

The summary of TCDC/ECDC activities presented here covers a period in which measures have begun to be applied for the promotion, and to facilitate the utilization, of TCDC/ECDC as a working tool for the mobilization of national and collective resources for the implementation of the Regional Strategies of Health for All by the Year 2000.

It is to be hoped that, as the year 1985 advances, there will be an accentuation of the trend observed in the countries and in the Organization's programs of progressively systematizing and using TCDC/ECDC, and that it will become possible to examine and evaluate both qualitatively and quantitatively the results of this mechanism of cooperation.