



Pan American
Health
Organization



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REGIONAL OFFICE FOR THE Americas

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B. SUBREGIONAL ORGANIZATIONS

Introduction

1. The framework for subregional technical cooperation is supported by Resolution CD45.R6 (1), adopted by the Directing Council in 2004. With the adoption of this resolution, subregional technical cooperation was included in the budget policy in order to promote the strengthening of Pan American Health Organization (PAHO) collaboration in integration processes in three subregions: Central America, the Caribbean, and South America.

2. The purpose of this report is to inform the Member States of relevant developments since the last report presented in 2018 with respect to public health-related agreements and resolutions within the framework of subregional integration processes of interest to the Governing Bodies of PAHO.

3. This report also covers the progress made in activities carried out as part of cooperation agreements between PAHO and subregional integration entities.

4. Through the signing of specific agreements and memorandums of understanding, PAHO currently provides technical cooperation to the subregional integration organizations mentioned below. This report includes tables showing the new developments and progress made in the implementation of priority resolutions emanating from these integration bodies, their relation to PAHO activities, and the measures that the Organization has supported.

a) Central America

- Central American Integration System (SICA): Council of Ministers of Health of Central America and the Dominican Republic (COMISCA); Regional Intersectoral Forum for the Health of Central America and the Dominican Republic; Central American Economic Integration System (SIECA)
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- Mesoamerican Integration and Development Project (MIDP)
 - Mesoamerican Public Health System (MPHS)
- b) Caribbean
- Caribbean Community (CARICOM): Council for Human and Social Development (COHSOD); Council for Trade and Economic Development (COTED)
- c) South America
- Andean Community: Andean Health Agency-Hipólito Unanue Agreement (ORAS-CONHU)
 - Southern Common Market (MERCOSUR): Meeting of Health Ministers of MERCOSUR and Working Subgroup 11 on Health (SGT 11)
 - Union of South American Nations (UNASUR)
 - Amazon Cooperation Treaty Organization (ACTO)

Integration Entities in Central America

Central American Integration System

5. The Pan American Health Organization (PAHO) provides technical cooperation to various entities (bodies, secretariats, and specialized institutions) of the Central American Integration System (SICA).¹ However, given the binding nature of the resolutions, this report focuses on the Council of Ministers of Health.

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

6. The Council of Ministers of Health of Central America and the Dominican Republic (COMISCA) is part of the political body of SICA; its purpose is to identify and prioritize regional health issues. COMISCA constitutes the main regional forum for analysis, deliberation, and presentation of proposals by the ministers of health. On 4 December 2017, a cooperation agreement was signed by the Executive Secretariat of COMISCA (SE-COMISCA) and PAHO/WHO, establishing the framework for cooperation and coordination to strengthen the joint activities of the two organizations, including the joint preparation (currently in progress) of the Health Cooperation Strategy for Central America and the Dominican Republic. This cooperation agreement complements the provisions of the cooperation agreement between PAHO/WHO and the General Secretariat of SICA, signed in 1995.

¹ More information on SICA is available at: <http://www.sica.int/>.

7. The Institute of Nutrition of Central America and Panama (INCAP), a center specializing in food and nutrition, is an institution of the Central American Integration System (SICA). The INCAP Directing Council is the highest governance body of the Institute. It consists of the ministers of health of the eight Member States and the Director of the Pan American Sanitary Bureau. From the inception of the Institute until 2010, PAHO served as the administrator of INCAP and, at the same time, as a participating member of the Directing Council and Advisory Council. Since 2010, the relationship between PAHO and INCAP has been governed by a memorandum of understanding for collaboration; the current MOU ends in December 2019.

8. Every two years, a biennial work plan responding to the PAHO Strategic Plan is prepared and implemented with technical advice from PAHO.

9. The last two regular meetings of COMISCA were held on 21 June 2018 in Santo Domingo, Dominican Republic, and on 6-7 December 2018 in Placencia, Belize. INCAP's Directing Council met in April 2018 in Panama.

COMISCA XLIX Regular Meeting of COMISCA Placencia, Belize, 6-7 December 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>COMISCA Resolution 10-2018: Regional Malaria Elimination Initiative (RMEI). The resolution instructs SE-COMISCA to hold meetings with authorities from Central American and Dominican Republic ministries of health to define the work process for reaching bilateral and cross-border agreements. It also instructs SE-COMISCA to support the following countries in securing bilateral and cross-border agreements for malaria elimination: Honduras-Nicaragua, El Salvador-Guatemala, Costa Rica-Nicaragua.</p>	<p>PAHO has been supporting the countries' actions under the new Regional Malaria Elimination Initiative (RMEI). Through this binding resolution adopted by COMISCA, the sub regional mechanism further contributes to the implementation of the Plan of Action for Malaria Elimination 2016-2020 approved under resolution CD55.R7 by the PAHO Directing Council.</p>
<p>COMISCA Resolution 11-2018: Health Regulations within the Framework of SICA. The resolution aims to include SE-COMISCA's Medicines Unit in the Central American Technical Regulations group and to have a list of projects and proposed mechanisms for joint work with the Central American Economic Integration System (SIECA). It also requests the inclusion of an expert as a national delegate in these subregional meetings.</p>	<p>COMISCA has consistently aimed to work in an intersectoral manner. The relation with SIECA should enhanced health sector influence in commercial issues that have an impact on health.</p>

COMISCA XLIX Regular Meeting of COMISCA Placencia, Belize, 6-7 December 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>COMISCA Resolution 14-2018: Political Position on the Elimination of Tuberculosis, Chronic Noncommunicable Diseases and on 40 Years of Primary Health Care. The resolution reiterates the commitment of COMISCA Member States to fulfill the provisions of the Astana Political Declaration on the elimination of tuberculosis (TB), on fighting chronic noncommunicable diseases (NCDs), and on primary health care.</p>	<p>PAHO is providing support for technical and laboratory development through regional coordination between SE-COMISCA, ORAS, PAHO, and the Global Fund to Fight AIDS, Tuberculosis and Malaria. PAHO, together with INCAP, supports implementation of the annual work plan established by COMISCA's Technical Commission on Chronic Diseases and Cancer (CTCC) to respond to the epidemic of NCDs by developing mandatory subregional strategies and plans. Resolution 14-2018 strives to integrate the pillars of COMISCA into primary health care (PHC), pursuant to the Alma-Ata and Astana provisions.</p>
<p>COMISCA Resolution 18-2018: Health Agenda for Central America and the Dominican Republic. The resolution adopts the 2019-2030 Health Agenda for Central America and the Dominican Republic as a strategic policy instrument guiding regional health-related actions.</p>	<p>The Health Cooperation Strategy for Central America and the Dominican Republic is being developed under the framework of the Sustainable Health Agenda for the Americas 2018-2030 (SHAA2030) taking into account the Health Agenda for Central America and the Dominican Republic for setting strategic priorities and defining spheres of action.</p>
<p>COMISCA Resolution 19-2018: Approval of the Regulations of the Regional Intersectoral Forum for the Health of Central America and the Dominican Republic. The Regional Intersectoral Forum analyzes and crafts technical proposals to serve as input for analysis and for policy and strategic decision-making in the SICA Councils of Ministers, and particularly in COMISCA.</p>	<p>The transition from the Meeting of the Health Sector of Central America and the Dominican Republic (RESSCAD) to the Regional Intersectoral Forum received technical and financial support from PAHO.</p>
<p>COMISCA Resolution 20-2018: Updating of the Regional Strategic Plan for the Prevention of Adolescent Pregnancy in Central America and the Dominican Republic. Ministers affirmed their commitment to the issue of adolescent pregnancy and agreed to prepare a regional plan to reduce adolescent pregnancy.</p>	<p>PAHO, the Latin American Center of Perinatology, Women and Reproductive Health (CLAP) and the United Nations Population Fund (UNFPA) provided support to the strategic plan. The CAM Subregional Program has supported the work to establish the baseline of the plan.</p>
<p>COMISCA Resolution 22-2018: Health of Migrants. The resolution instructs SE-COMISCA to develop strategies to improve the health of migrants and to explore with the Mexican Agency for International Development Cooperation</p>	<p>The health of migrants has been included as a key topic in the Subregional Cooperation Strategy for Central America and the Dominican Republic.</p>

COMISCA XLIX Regular Meeting of COMISCA Placencia, Belize, 6-7 December 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>(AMEXCID) lines of work related to migrant health. It places this activity under the first Regional Intersectoral Forum (2017, Panama), where inclusion of the subject was proposed. It also requests that a work strategy be presented at the third Forum, tentatively scheduled for 2019.</p>	
<p>COMISCA Resolution 23-2018: Analysis of the Regional ABC Study of Medicines within the Framework of the COMISCA Joint Negotiation. The resolution recognizes the need to review the current status of medicine management and to identify opportunities for improvement, with a view to building national and regional capacity in this area.</p>	<p>PAHO provides technical cooperation to the countries to improve procurement planning and programming.</p>
<p>COMISCA Resolution 26-2018: Health Cooperation Strategy for Central America and the Dominican Republic. The ministers acknowledged receipt of the progress report on the Health Cooperation Strategy for Central America and the Dominican Republic and instructed SE-COMISCA, in coordination with PAHO, to finalize the preparation of the strategy.</p>	<p>The Subregional Cooperation Strategy for Central America and the Dominican Republic is being developed and expected to be approved in June 2019 in the COMISCA meeting in Antigua, Guatemala.</p>
<p>COMISCA Resolution 27-2018: Chronic Kidney Disease and the Regulation of Organ Transplant and Donation. The ministers resolved to prioritize the issue of chronic kidney disease in the SICA region and instructed SE-COMISCA to inventory the laws and regulations in effect that relate to organ transplant and donation; to conduct meta-analysis of available studies in the subregion; and to coordinate intersectoral actions with other SICA entities, including the Central American Commission on Environment and Development (CCAD) and the Central American Agricultural Council (CAC).</p>	<p>In March 2019, an intersectoral meeting was held in San José, Costa Rica, with entities and researchers from around the world to review the latest scientific findings on CKD and coordinate a road map to address the disease.</p>

COMISCA XLIX Regular Meeting of COMISCA Placencia, Belize, 6-7 December 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>COMISCA Resolution 28-2018: Delivery of the Central American Adverse Drug Events Pharmacovigilance Data (FACEDRA) Platform. The resolution highlights support for the subregion from the Spanish Agency of Medicines and Medical Devices (AEMPS), with the implementation of pharmacovigilance in the subregion within the framework of the memorandum of understanding with SE-COMISCA. The FACEDRA regional pharmacovigilance platform was transferred to SE-COMISCA, as the Regional Pharmacovigilance System for Drug Regulators of the SICA Member States.</p>	<p>This resolution represents a duplication of efforts in this thematic area. PAHO has been working with countries for more than five years with the support of WHO Collaborating Centre for International Drug Monitoring, known as the Uppsala Monitoring Centre. This center receives global information. This work has strengthened the pharmacovigilance system allowing for data collection, analysis prior to reporting to Uppsala Monitoring Centre.</p> <p>The Central American countries, except for Belize and Nicaragua, are members of the program.</p> <p>PAHO will propose a technical discussion with COMISCA to define which of the system brings more benefits to the countries in the region and avoid the existing duplication.</p>

Mesoamerican Integration and Development Project

10. The Mesoamerican Integration and Development Project (MIDP)² is a mechanism developed by 10 Mesoamerican countries to strengthen regional integration and to promote economic and social development in the participating countries. The objective is to improve conditions and human prosperity among the population. It was officially launched by the presidents and heads of state and government at the Tenth Summit of the Tuxtla Dialogue and Agreement Mechanism, held in Tabasco, Mexico, on 27-28 June 2008.

Mesoamerican Public Health System

11. The purpose of the Mesoamerican Public Health System (SMSP) is to respond to the main shared challenges in public health and to strengthen the national health systems through selected interventions and operational support of the Mesoamerican Public Health Institute (IMSP), established on 3 July 2009. Colombia assumed the presidency *pro tempore* on 1 January 2019 and its work plan emphasizes the implementation social and economic programs giving priority to the development of a methodology to prioritize investments.

² More information on the Mesoamerican Integration and Development Project is available at: <http://www.proyectomesoamerica.org/>.

Caribbean Integration Entities

Caribbean Community

12. The Caribbean Community (CARICOM)³ is a group of 20 countries: 15 Member States and five Associate Members. It came into being in July 1973 with the signing of the Treaty of Chaguaramas, which defines its structure of organs, bodies, and institutions. The organs are the Conference of Heads of Government and the Ministerial Councils, which have responsibility for key policy areas and are the decision-making bodies of CARICOM. The Strategic Plan for the Caribbean Community 2015-2019 operationalizes CARICOM's four pillars: economic integration, foreign policy coordination, human and social development, and security.

13. The CARICOM Conference of Heads of Government meets twice a year, for an inter-sessional meeting and a regular meeting. CARICOM also convenes an annual Council for Human and Social Development (COHSOD), which is responsible for the promotion of health, education, and living and working conditions in the Caribbean Community. The chair rotates among the member countries every year. COHSOD meetings are traditionally held at PAHO Headquarters prior to the Pan American Sanitary Conference or the Directing Council.

14. PAHO's relationship with CARICOM is defined by a memorandum of understanding signed in 1983. The PAHO Subregional Program Coordination Office is the Organization's main interlocutor with CARICOM. Through technical cooperation provided by this office, PAHO supports the development and implementation of Caribbean Cooperation in Health, the functional cooperation strategy adopted by CARICOM ministers of health. The PAHO Subregional Cooperation Strategy for 2016-2019 is fully aligned with the CARICOM Caribbean Cooperation in Health strategy for 2016-2025.

15. The Caribbean Public Health Agency (CARPHA) is an institution of the Caribbean Community (pursuant to Article 21 of the Revised Treaty of Chaguaramas), established in 2011. The Twenty-Eighth Conference of Heads of Government of the Caribbean Community in July 2007 approved the integration of the five Caribbean regional health institutions into a single agency, CARPHA. Two of the regional health institutions, the Caribbean Epidemiology Centre (CAREC) and the Caribbean Food and Nutrition Institute (CFNI), were administered by PAHO. PAHO's 50th Directing Council adopted Resolution CD50.R14, which requested PAHO to work with the CARICOM Secretariat to transfer the relevant functions and resources of CAREC and CFNI to CARPHA.

16. Since CARPHA became operational in 2012, a framework agreement between CARPHA and PAHO defines its relationship. Under this agreement, CARPHA and PAHO jointly prepare biennial work plans whereby PAHO provides financial support

³ More information on the CARICOM is available at: www.caricom.org.

toward strategic objectives based on the two parties' respective roles, responsibilities, and objectives.

CARICOM 30th Inter-Sessional Meeting of the Conference of Heads of Government of the Caribbean Community St. Kitts and Nevis, 26-27 February 2019	
Health-related agreements and resolutions	Subregional impact and progress
No health-related decisions were made during the 30th Inter-Sessional Meeting of the Conference of Heads of Government. The CARICOM Single Market and Economy (CSME) was discussed as an agenda item. The Protocol on Contingent Rights covers the rights of persons moving to another country under the free movement of skills regime, as well as the spouses and dependents of those who move to other countries.	The Protocol on Contingent Rights has implications for health. PAHO will collaborate with CARICOM to analyze decisions especially with regards to human resources for health and universal access to health and universal health coverage.

CARICOM 35th Meeting of the Council on Human and Social Development (COHSOD) Washington, D.C., 21-22 September 2018	
Health-related agreements and resolutions	Subregional impact and progress
The COHSOD considered the presentation of a general report on the Caribbean Cooperation in Health IV (CCH IV) 2016-2025, which articulates CARICOM's health priorities for its Member States. The COHSOD endorsed the composition and objectives of the Steering Committee and the Monitoring and Evaluation Strategy. The Council also agreed to the development of a three-year work plan.	The PAHO Subregional Program Coordination Office continues to offer support to CCH IV including technical assistance for coordination and implementation of the CCH IV.
The COHSOD requested that a written letter be sent to the World Health Organization (WHO) regarding the continued Centers for Disease Control and Prevention (CDC) advisories being issued on CARICOM Member States.	The WHO Zika virus country classification scheme (which categorized most of the Caribbean territories as having active Zika virus transmission) is no longer in force, having been replaced by periodic epidemiologic updates to guide public health programs and traveler health.

CARICOM 35th Meeting of the Council on Human and Social Development (COHSOD) Washington, D.C., 21-22 September 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>The COHSOD endorsed the Roadmap on Information Systems for Health (IS4H) in 2017, and in 2018 the Council recognized progress in advancing its implementation.</p>	<p>PAHO continues to support the CARICOM Technical Working Group on IS4H, which reached agreement on the approach to implementation and monitoring of the roadmap on IS4H in the Caribbean based on the current initiatives in place. A series of webinars were held in conjunction with the WHO Collaborating Center for Health Technology Assessment, University of Ottawa, to develop capacity in integrated mechanisms for evidence-informed decisions.</p>
<p>Health workforce migration: Regional Rights-Based Framework for Migrants and Mobile Populations—Protocol: The COHSOD considered the preliminary findings of the PAHO study on the mobility and migration of the health workforce and agreed to a Ministerial-Level Working Group to guide the preparation of the final report.</p>	<p>PAHO commissioned the study on health workforce migration.</p>
<p>The Strategy and Plan of Action for the Elimination of Mother-to-Child Transmission of HIV and Congenital Syphilis (Resolution CD50.R12 [2010]) indicates that the basic conditions for eliminating the two diseases are within reach of the countries.</p> <p>The COHSOD supported strategic action to address persisting challenges, particularly in laboratory and surveillance, which potentially can hinder the further advance of EMTCT validation and maintenance of the gains in the Caribbean.</p>	<p>PAHO continues to provide technical support to countries to develop national plans to address gaps and challenges and to develop and review national Elimination of Mother-to-Child Transmission (EMTCT) reports, while supporting countries to advance to the EMTCT validation phase. Currently, seven of the 11 countries validated globally for EMTCT, and seven of the eight that have achieved dual elimination of HIV and syphilis, are in the Caribbean.</p>
<p>Implementation of the International Health Regulations (IHR) of 2005 (Resolution WHA65.23 [2012]): The COHSOD urged States to intensify their efforts to strengthen human resources capacity for preparedness and response to public health events by using the Caribbean Regional Field</p>	<p>PAHO continues technical support to States Parties to strengthen IHR core capacities, particularly in areas such as chemical and radionuclear events in cooperation with the International Atomic Energy Agency (IAEA).</p> <p>Thus far, Joint External Evaluations (JEE) have been conducted in Haiti, Belize, and Grenada.</p>

CARICOM 35th Meeting of the Council on Human and Social Development (COHSOD) Washington, D.C., 21-22 September 2018	
Health-related agreements and resolutions	Subregional impact and progress
<p>Epidemiology and Laboratory Training Programme (CR-FELTP) and the PAHO online epidemiology training program. The COHSOD agreed that CR-FELTP should be the main strategy for building human resources capacity to prepare for and respond to public health events of concern.</p>	<p>PAHO collaborates with Public Health England, the Public Health Agency of Canada, and other partners to strengthen capacities at points of entry, including ports.</p> <p>The three epidemiology courses offered by PAHO Skills Online were also recognized as useful in building capacity in epidemiology. PAHO is currently developing two additional Skills Online courses in surveillance.</p>
<p>Health financing and universal access to health and universal health coverage: The COHSOD reviewed and accepted the key priorities discussed by high-level officials from the ministries of health, ministries of finance, and national health insurance institutions at the Sub-Regional Dialogue organized by PAHO in August 2018 in Barbados. The Council endorsed the proposed actions and mechanisms for strengthening health financing toward universal health in the Caribbean.</p>	<p>PAHO convened a meeting of high-level officials from the ministries of health, ministries of finance, and health insurance institutions of 20 CARICOM Member States and Associate Members, along with regional partners. The main outcomes included shared knowledge of health financing concepts, techniques, and practices, and examination of country practices; assessment of country health financing arrangements; identification of main challenges in the Caribbean; and agreement on a subregional agenda on health financing and universal health.</p> <p>PAHO is supporting the Organization of Eastern Caribbean States (OECS) working group to review current health financing arrangements and conduct case studies on health financing and health service delivery models for universal health coverage.</p>
<p>The COHSOD supported the process led by the CARICOM Regional Organization for Standards and Quality (CROSQ) to revise the 2010 CARICOM Regional Standard: Specification for Labelling of Pre-packaged Foods (CRS 5:2010) to incorporate mandatory front-of-package labeling and the development of the nutritional labeling standard.</p>	<p>CROSQ, in collaboration with the CARICOM Secretariat, the CARICOM Office of Trade Negotiations, the Caribbean Public Health Agency (CARPHA), the George Alleyne Chronic Disease Research Center (CDRC), and the Healthy Caribbean Coalition (HCC), is facilitating the revision of the 2010 CARICOM Regional Standard: Specification for Labelling of Pre-packaged Foods (CRS 5:2010) and the development of a separate standard for nutritional labeling. In addition, there is South-South Cooperation being undertaken between Chile and</p>

CARICOM 35th Meeting of the Council on Human and Social Development (COHSOD) Washington, D.C., 21-22 September 2018	
Health-related agreements and resolutions	Subregional impact and progress
The Council advocated for the presence of ministries of health in the National Bureau of Standard's process. The COHSOD also encouraged support at the highest political level to advance domestic legislation and regulations on front-of-package labeling (FOPL).	CARICOM on this topic and supported by PAHO's Country Cooperation For Health Development (CCHD) financial mechanism.

South American Integration Entities

Andean Community: Andean Health Agency-Hipólito Unanue Agreement

17. In the Andean Integration System, the Andean Health Agency-Hipólito Unanue Agreement (ORAS-CONHU)⁴ acts as executive secretariat for the Meeting of Ministers of Health of the Andean Area (REMSAA).⁵ 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. 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 Andean agency's recently approved strategic plan for health integration. The PAHO Subregional Cooperation Strategy for South America for 2019-2022 is in complete accordance with the ORAS-CONHU strategic plan for health integration for 2018-2022. The XXXVII Regular Meeting of Ministers of Health of the Andean Area was held in Quito, Ecuador, on 6 November 2018, where its presidency *pro tempore* was transferred to Peru. The next REMSAA is scheduled for the first semester of 2019.

ORAS-CONHU XXXVII Meeting of Ministers of Health of the Andean Area (REMSAA) Quito, Ecuador, 6 November 2018	
Health-related agreements and resolutions	Subregional impact and progress
The ministers approved the report of the Andean Border Health Plan (PASAFRO) 2016-2018 and its extension to 2022.	PAHO is working with ORAS-CONHU, MERCOSUR, and the Amazon Cooperation Treaty Organization (OTCA) to identify border areas where there is a need to strengthen and articulate health services and fill gaps in human resources, and to prioritize health problems in those areas using the

⁴ More information on ORAS/CONHU is available at: <http://www.orasconhu.org>.

⁵ More information on REMSAA resolutions is available at: <http://www.orasconhu.org/reuniones-ordinarias>.

ORAS-CONHU XXXVII Meeting of Ministers of Health of the Andean Area (REMSAA) Quito, Ecuador, 6 November 2018	
Health-related agreements and resolutions	Subregional impact and progress
	Health Situation Analysis in border areas tool developed by Peru, in accordance with the PAHO Strategic Plan 2014-2019 and PAHO's Subregional Cooperation Strategy for South America.
A resolution on the status of adolescent pregnant women in the Andean countries was approved, and the current Andean Plan for Prevention and Reduction of Adolescent Pregnancy was extended until 2022.	This resolution is in accordance with Resolution CD56.R8 (2018), which defines a series of actions aimed at ending preventable deaths among women, children, and adolescents; ensuring their physical and mental health and well-being throughout their life course; and expanding enabling environments, so that no one is left behind.
A resolution on the health situation of Afro-descendants in the Andean countries was approved, and the Andean Plan for the Health of Afro-descendants was extended until 2022.	PAHO has been working with ORAS and the Andean Community (CAN) to include the health priorities of Afro-descendant populations in the subregional agenda for social development. Promoting inclusion of the ethnicity variable in health records maintained by health systems in South America has been identified as a key step toward addressing health challenges in Afro-descendant populations.
The Andean Plan for Prevention and Control of Noncommunicable Diseases and Their Risk Factors 2018-2022 was approved, along with a resolution on healthy food for children and adolescents to reduce risk of NCDs.	PAHO contributed substantially to the development of this plan and supports its implementation. PAHO will continue working on this key issue in accordance with the PAHO Strategic Plan 2014-2019 and PAHO's Subregional Cooperation Strategy for South America.
The resolution on Climate Change and the Andean Plan for Risk Management of Emergencies and Disasters 2018-2022 was approved.	PAHO is supporting countries in the subregion in the development of the adaptation plans in accordance with its Strategy and Plan of Action on Climate Change, approved in Resolution CD51.R15 (2011). This resolution will allow for further strengthening this work.
The Andean Policy on Human Resources for Health and its Plan of Action 2018-2022 was approved, consistent with the global and regional strategy.	PAHO contributed to the development of this plan and supports its implementation, complementing regional and country actions supported by PAHO.
The creation of the Andean Committee on Mental Health was approved.	PAHO contributed substantially to the creation of this subregional committee as a means to continue working on this issue in accordance with the PAHO Strategic Plan 2014-2019 and PAHO's Subregional Cooperation Strategy for South America.

ORAS-CONHU XXXVII Meeting of Ministers of Health of the Andean Area (REMSAA) Quito, Ecuador, 6 November 2018	
Health-related agreements and resolutions	Subregional impact and progress
The 2018 annual report of ORAS-CONHU was presented and approved by the ministers of health. The next REMSAA will be held in Chile in 2019, and the election of the ORAS executive secretary will take place in April 2019.	PAHO contributed with the implementation of an Annual Plan of Activities 2018 through a letter of agreement and technical support to the different Andean technical committees.

Southern Common Market: Meeting of Health Ministers of MERCOSUR and Working Subgroup 11 on Health

18. Working Subgroup 11 on Health (SGT 11) addressed health issues during the Meeting of Health Ministers of the Southern Common Market (MERCOSUR)⁶ and Associated States. The Working Subgroup is a technical body made up of representatives of the States Parties of MERCOSUR. Its main objective is to formulate and harmonize common regulations in MERCOSUR within each area of jurisdiction. The meeting sought to harmonize strategic policies linked with public health and align them with regional priorities, as well as to develop plans and programs of action for their joint implementation. The Member States rotate the presidency *pro tempore* every six months, and Uruguay held the presidency *pro tempore* in the second half of 2018. Meetings are held in the country that holds the presidency *pro tempore*. PAHO participates as the technical advisory agency on health. An umbrella memorandum of understanding was signed between PAHO and MERCOSUR on 11 June 2015.

19. PAHO's Subregional Program for South America is the Organization's main interlocutor with MERCOSUR and, through its technical cooperation, supports development and implementation of the thematic areas contained in the memorandum of understanding. PAHO's Subregional Cooperation Strategy for South America for 2019-2022 is completely aligned with the thematic areas defined in the memorandum of understanding. The XLIII Meeting of Health Ministers of MERCOSUR was held in Montevideo, Uruguay, on 23 November 2018. At this meeting, the presidency *pro tempore* was transferred to Argentina. The next Meeting of Health Ministers of MERCOSUR will be held in June 2019 in Argentina.

⁶ More information on MERCOSUR is available at: <http://www.mercosur.int>.

MERCOSUR XLIII Meeting of Health Ministers of MERCOSUR Montevideo, Uruguay, 23 November 2018	
Health-related agreements and resolutions	Subregional impact and progress
Ministers of health from MERCOSUR and Associated States signed a declaration to place health at the front and center of national climate change adaptation plans.	This resolution reaffirms PAHO Resolution CD51.R15 (2011) on health and climate change. It aims to ensure that health systems become climate-resilient and that health prevention and promotion are fully integrated with climate services.
The ministers approved a declaration on mother-to-child transmission of HIV, syphilis, and hepatitis B, reaffirming the commitment to address this issue in MERCOSUR.	This agreement is aligned with the Plan of Action for the Prevention and Control of HIV and Sexually Transmitted Infections 2016-2021, which was approved by the Governing Bodies of PAHO in 2016 through Resolution CD55.R5 (2016).
The meeting approved a resolution to promote the safety and availability of blood products in MERCOSUR countries.	This agreement is in accordance with resolutions WHA63.12 (2010) and CD53.R6 (2014). PAHO will support the Intergovernmental Commission of MERCOSUR to implement this agreement.
The ministers approved a declaration on joint price negotiations for medications used to prevent organ rejection in transplanted patients and to treat hepatitis C.	Several MERCOSUR States Parties (Argentina, Paraguay, and Uruguay) and Associated States (Chile, Colombia, and Peru) have negotiated significant price reductions. MERCOSUR's Ad Hoc Committee for Negotiation of Prices of High-Cost Medicines was reaffirmed. It is expected that purchases will be made through PAHO's Strategic Fund having a positive impact on cost and availability of medicines for PAHO's Member States. Technical assistance for this committee's work is expected to be maintained

Union of South American Nations

20. The Union of South American Nations (UNASUR)⁷ has a South American Health Council (CSS), made up of a Coordinating Committee, a Technical Secretariat, five technical groups, six networks, and the South American Institute of Governance in Health (ISAGS). The Technical Secretariat convenes and supports the Council's meetings. It consists of representatives from three Member States: the Member holding the current presidency *pro tempore* of UNASUR and the Members holding the immediately preceding and subsequent presidencies *pro tempore*. The presidency of the CSS corresponds to the minister of health of the country that occupies the presidency *pro tempore* of UNASUR, which is held successively by each Member State, in alphabetical order, for one-year periods. Meeting of Ministers of Health were not held during the reporting period.

⁷ More information on UNASUR is available at: www.unasursg.org.

Amazon Cooperation Treaty Organization

21. Within the framework of the Amazon Strategic Cooperation Agenda for 2010-2018, PAHO/WHO carries out technical cooperation with the Permanent Secretariat of the Amazon Cooperation Treaty Organization (ACTO) through health coordination activities. The memorandum of understanding on cooperation was renewed in June 2017, defining cooperation in accordance with the Agenda's strategic lines for regional health management and knowledge management. PAHO's Subregional Cooperation Strategy for South America for 2019-2022 is fully coherent with the health-related components of the ACTO agenda. On 1 January 2019 Maria Alexandra Moreira of Bolivia took office as the new secretary, serving from 2019 to 2021.

Action by the Executive Committee

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

References

1. Pan American Health Organization. Regional Program Budget Policy [Internet]. 45th Directing Council of PAHO, 56th session of the Regional Committee of WHO for the Americas; 27 September to 1 October 2004; Washington, DC. Washington, DC: PAHO; 2004 (Resolution CD45.R6) [cited 2019 March 4 10]. Available from: <http://www1.paho.org/english/gov/cd/CD45.r6-e.pdf>.

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