







## National Health Strategic Plan Workshop Tuesday, July 30<sup>th</sup>, 2024

This National Health Strategic Plan Workshop constitutes itself as a participatory, consultative dialogue space. Its purpose is to capture "voices", perceptions and priorities of a wide range of key stakeholders.

| AGENDA        |   |
|---------------|---|
| 8:30 – 9:00   | Registrations and Welcome Attendees sign in- networking opportunity / Participant's introduction  |
| 9:00 – 9:10   | National Anthem and Prayer  |
| 9:10 – 9:30   | Workshop presentation & Opening Remarks Welcome Address: Dr. Karen Lewis-Bell PWR PAHO Belize Dr. Jorge Polanco MoHW Belize   |
| 9:30- 9:40    | Overview of Workshop Objectives  Dr. Roberto Böhrt, PAHO/WHO, Health Systems and Services Advisor   |
| 9:40-10:10    | Improving Overall Public Health in Latin America and Belize: New Framework for the Essential Public Health Functions for Health Systems Strengthening Dr. Natalia Houghton PAHO/WHO Primary Health Care and Integrated Service Delivery-Health Systems and Services |
| 10:10-10:40   | Current State of the Health System in Belize General View and accomplishment of 2014-2024 National Health Strategic Plan Ms. Lizzet Bell MoHW   |
| 10:40 - 11:00 | Coffee Break  |
| 11:00 -12:00  | SWOT Exercise – Status of Belize Health System Working groups. See Annex 1  |
| 12:00 – 13:00 | Lunch   |
| 13:00 – 13:45 | Belize Health System current situation Plenary  |
| 13:45 - 15:15 | Capturing participants' vision on the future Working groups and plenary. See Annex 2  |
| 15:15 – 16:30 | Main priorities for the next National Health Strategic Plan<br>Working groups and plenary. See Annex 3  |
| 16:20-16:30   | Steps forward and Workshop Closing Dr. Roberto Böhrt, PAHO/WHO, Health Systems and Services Advisor   |









## **ANNEX 1 – SWOT Exercise**

Each group will work a SWOT exercise for the following items:

- **I.** Expanding equitable access to comprehensive, quality, people- and community-centered health services:
  - **Group 1:** Equitable access (physical, financial, cultural, etc.) on good quality, peoplecentered health service delivery.
  - Group 2: Equitable access to Human Resources, Medicines & Technology
  - **Group 3**: Information management for an equitable, effective health system, epidemiological surveillance and digital health.
- **II. Group 4**: Strengthening stewardship and governance.
- **III. Group 5**: Increasing and improving financing, with equity and efficiency, and advancing toward the elimination of direct payments that constitute a barrier to access at the point of service.
- **IV.** Strengthening multisectoral coordination to address the social determinants of health **Group 6:** Multisectorial coordination and strategic alliances & capacities to better address the impact of Climate Change on health.
  - **Group 7**: Multisectorial coordination and strategic alliances & capacities to address the social determinants and ensure leaving no one behind.

Each group will designate a group coordinator and a secretary.

A presenter will also be selected by the group, for each SWOT exercise product to be presented in the Plenary.









## ANNEX 2 - Matrix & Method for Second Group Work: Capturing participants' vision on the future

Each group will designate a group coordinator and a secretary. A presenter will also be selected by the group, for each group matrix (product) to be presented in the Plenary.

Overall questions: How do we see ourselves? In ten years? In five years? Levels of reflection (Drawing on the current 2014-2024 NHSSP Vision)

- a) Our People Are we healthy, empowered and in correct relationship with their environment
- b) What do we expect from Belize's Health System and Belize's Social System? Are we prepared to fulfil and be responsive to our people's needs?
- c) Thinking on intra-sectorial synergies and social determinants of health, how could we articulate efforts (Between National local level, among keystakeholders)
   Method: Group work (50 minutes) and Plenary (40 minutes)
   3-4 Working groups for the three areas (People's health & empowered, Health System Responsiveness & intra- and multi-sectorial alliances/synergies for effectively addressing social determinants of health). Standing on the composition of the participants, it could be 2 working groups for health system responsiveness.

| Working           | Where are we?               | What do we need to        | What do we need to       |
|-------------------|-----------------------------|---------------------------|--------------------------|
| Groups            | (Current situation)         | address along the next    | achieve in 10 years?     |
|                   |                             | 5 years? Why?             |                          |
| Our People – Are  | Which are our people's      | (i.e.) Reduce ARI         |                          |
| we healthy,       | main health                 |                           | Where do we want to be   |
| empowered and     | problems/conditions?        | Reduce deaths generated   | in 10 years from now (on |
| in correct        |                             | by accidents or external  | the previous prioritized |
| relationship with | How have their indicators   | violence?                 | sickness/ conditions)?   |
| our               | progressed?                 |                           |                          |
| environment?      |                             | Reduce most prevalent     | What will we improve?    |
|                   | How well informed is our    | infections                |                          |
|                   | people for improving their  |                           |                          |
|                   | health?                     | Reduce prevalence of non- |                          |
|                   |                             | communicable diseases     |                          |
|                   | Do our people actively      |                           |                          |
|                   | participate on decision-    |                           |                          |
|                   | making spaces for improving |                           |                          |
|                   | health system performance?  |                           |                          |
| What do we        | Bearing on mind equity as   | Drawing on the group's    |                          |
| expect from       | main criteria               | previous diagnosis and    |                          |
| Belize's Health   |                             | identified priorities     |                          |
| System and        | Which proportion            |                           |                          |
| Belize's Social   | (percentage?) of the        |                           |                          |
| System?           | population has Access to    |                           |                          |
|                   | health services?            |                           |                          |









| European L         | Inion   | Lette |  |
|--------------------|---|-------|--|
| Are we prepared    | Are there financial barriers                    |       |  |
| to fulfil and be   | for access?                                     |       |  |
| responsive to our  | How many people suffer of                       |       |  |
| people's needs?    | economic distress when                          |       |  |
|                    | reaching health care?                           |       |  |
| (2 Working         | How are we measuring                            |       |  |
| groups?)           | health services quality and                     |       |  |
|                    | how are we doing as health                      |       |  |
|                    | system?   |       |  |
|                    | A 11 1 - 1 - 1                                  |       |  |
|                    | Are there any excluded                          |       |  |
|                    | group?  |       |  |
|                    | (The group could work on                        |       |  |
|                    | (The group could work on the basis of practical |       |  |
|                    | examples of sickness or                         |       |  |
|                    | special condition affecting                     |       |  |
|                    | people's health)                                |       |  |
| Thinking on        | Up to now                                       |       |  |
| intra-sectorial    | Which have been best                            |       |  |
| and multi-         | practices to address Social                     |       |  |
| sectorial          | Determinants in Health                          |       |  |
| synergies to       | within health sector?                           |       |  |
| better address     |   |       |  |
| social             | Which have been best                            |       |  |
| determinants of    | practices with concrete                         |       |  |
| health, how        | results addressing other                        |       |  |
| could we           | prioritised social                              |       |  |
| articulate efforts | determinants of health                          |       |  |
| (Between           | (education, environment,                        |       |  |
| National – local   | economics, etc?                                 |       |  |
| level, among key   |   |       |  |
| stakeholders)      |   |       |  |









## ANNEX 3 - Main priorities for the next National Health Strategic Plan

"What do we need to address in the next 10 years? The next 5 years? And why?"

**Method:** Group work (50 minutes, based on previous reflection and product) and Final Plenary (40 minutes)

Groups will be the same as those of the previous exercise. Each group could keep their group coordinator and secretary or nominate new ones. A presenter will also be selected by the group, for the group work to be presented in the Plenary.

From the Matrix second column ("What do we need to address along the next 5 years? Why?"), considering those were their thematic / priorities, the group should now provide their proposals on what is needed to be done to achieve concrete improvements, analysing:

- Policy decisions (high Level decisions / local measures)
- How to improve what already exist
- Which new processes / organizational arrangements / innovative strategies should be put in place and who should be responsible to do it
- Materials: the same materials than the previous exercise