















What is NISU?

NISU is an inter-agency, horizontal, technical cooperation initiative. Its objective is to exchange experiences and practical knowledge with other countries, both inside and outside the region, inspired by principles of fraternity and solidarity. The platform uses face-to-face and virtual mechanisms for its various modalities of cooperation.

NISU considers three complementing areas of action: i) the need to generate health intelligence to support decision-making processes; ii) the importance of making the tacit knowledge of organizations explicit; and iii) the regional mandate to strengthen horizontal cooperation between countries.

Why do we need better health intelligence?

The COVID-19 pandemic highlighted the need to have and generate reliable scientific knowledge for decision making in the face of global health challenges. The pandemic also showed that health threats do not respect geographical borders, making collaboration and exchange between countries necessary.

The term "health intelligence" has been incorporated into public health activities in response to this type of challenges and it includes a surveillance stage, conducting a careful and continuous observation of the environment, followed by a research stage, intended to obtain meaning from the information gathered and the context in which it must be interpreted.

The ultimate purpose of health intelligence is to use information to generate knowledge and contribute to evidence-based decision making.

What are the functions of NISU?

To identify and make visible experiences, initiatives and tacit or explicit knowledge of the Uruguayan health system.

To select and present to the international community best practices in the development of public health policies, health systems and services based on Primary Health Care (PHC), including Essential Public Health Functions (EPHF).

To systematize and manage horizontal cooperation exchanges and the existing knowledge to improve the Uruguayan health system.

What is NISU's scope of action?

The Uruguayan society and its professionals and officials (internal audience). The aim is to make visible the existing extensive knowledge and experience, very often tacit, complementing efforts to generate bottom-up, and top-down knowledge.

The international community (external audience) to facilitate access to the accumulated knowledge about the progress made by the Uruguayan health system and to strengthen the Latin American community as a global leader.

In the long term, NISU shall provide support in decision-making regarding health matters for the Uruguayan government.

Why Uruguay?

In recent decades, Uruguay has been able to provide international cooperation in health thanks to the development and implementation of public policies that have improved the nation's health and enhanced the performance of its health system.

As an example, Uruguay has a universal, equitable and financially supportive National Integrated Health System (SNIS), based on comprehensive, continuous care, with a focus on primary care. The SNIS provides coverage to 100% of the population with a public health spending of 6.2% of the gross domestic product and out-of-pocket health expenditure of only 15%.

The management of the pandemic has been very successful, developing best practices in clinical management, the use of scientific evidence for decision making, the adoption of public health measures, risk communication and social protection of vulnerable populations.

As of January 31, 2023, 82% of the Uruguayan population had two doses of COVID-19 vaccine, and has also registered one of the lowest fatality rates in the region.

In this context, during 2022 Uruguay held more than 20 bilateral meetings with different ministries of health, public laboratories, research centers, and foreign hospitals. It also carried out virtual exchanges and PAHO/WHO-mediated face-to-face visits with Belize, Bolivia, Brazil, Dominica and El Salvador. Chile, Colombia, Guyana and Peru have already expressed their interest in visiting Uruguay in 2023.

EFFECTIVE PUBLIC POLICIES HAVE ENABLED URUGUAY TO PROVIDE INTERNATIONAL **COOPERATION IN HEALTH**

URUGUAY 2022+20 BILATERAL MEETINGS

FOR

2023 AND PERU HAVE SHOWN INTEDEST IN EVOLUTIONS CHILE, COLOMBIA, GUYANA INTEREST IN EXCHANGE ACTIVITIES WITH URUGUAY.

What are some NISU's priority thematic areas?

Based on Uruguay's comparative advantages and the most frequent requests from countries seeking cooperation, NISU's priority thematic areas are:

- **o** A model of solidarity financing based on a per capita basis that contemplates risk by age and sex, while integrating variable payment to providers according to performance.
- **o** National Resource Fund to ensure funding and access to specialty medications and high-cost, complex health technologies.
- **o** Strengthening of primary care in the public and private sectors with a focus on Integrated Health Service Delivery Networks (IHSDN).
- **o** Digital transformation of the health system, including electronic medical records and telemedicine.
- **o** Integrated health surveillance with a "One Health" perspective and national vaccination program, including vaccination against COVID-19.
- **o** National policy of donation and transplantation of cells, tissues and organs of human origin and regenerative medicine.
- **o** Intersectoral response to address unintentional pregnancy in adolescents.
- **o** Comprehensive care in sexual and reproductive health and regulatory support to guarantee sexual and reproductive rights.
- o Control of antimicrobial resistance with a "One Health" perspective.
- **o** Comprehensive approach to risk factors for non-communicable diseases (NCDs) through food labeling, promotion of physical activity, and tobacco control.

What are NISU cooperation modalities?

Modality of cooperation	Audience	
	Internal	External
Repositories	Best Practices	Practices of excellence
Documents / Publications	> Repository of institutional documents	
Updates	> Information (Newsletters) > Blogs > Social Media	
Training	> In-person/Online courses > Internships > Rotation with experts (Nexpert)	> Study tours/visits
Consultancy		> Technical Assistance
Meeting Points	> National Health Forum > Communities of practice	> Communities of practice > Forums to address great regional challenges > Innovative Advances > Sub-regional Summits

What benefits are offered to participating countries?

Cooperation with Uruguay can optimize the institutional capacities of the recipient country and promote the exchange of practical knowledge and lessons learned. Similarly, cooperation with Uruguay can facilitate the transfer of health technologies or other innovations.

For participating countries, cooperation can help drive reforms and contribute to national dialog around health policies. In turn, these exchanges can support sub-regional and regional integration processes, as well as contribute to global health policy debates.

Cooperation between participating countries can stimulate strategic alliances around common problems to respond to regional and/or global challenges.

In addition, NISU can contribute to the generation of knowledge and innovation networks in Latin America and the Caribbean, balancing the existing production bias in favor of knowledge coming from developed countries; knowledge that, in some cases, cannot be applied in developing countries.

How is NISU organized?

NISU is made up of the following governance, management, communication, advice and financial support bodies:

Strategic Management Committee (CDE): made up of representatives from the MSP General Directorate of the National Health System; MSP General Directorate of Health; MSP General Coordination Directorate; MSP Department of International Relations and Cooperation; the Uruguayan Agency for International Cooperation (AUCI); and the Pan American Health Organization/World Health Organization (PAHO/WHO).

Project Management Unit (UGP): Composed of mixed staff (part-time officials and hired staff) and one person in charge of NISU's management.

Communication Cabinet (GC): tasks carried out through the existing channels of the participating institutions or generated by the UGP.

Advisory Council (CA): made up of representatives of the following institutions:

- + University of the Republic.
- + Office of the Resident Coordinator of the United Nations system.
- + State Health Services Administration (ASSE).
- + Private providers of SNIS.
- + Professional societies or organizations.
- + Civil Society Organizations.
- + Donor/funding agencies.

Others to be defined.

References

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