

ANNUAL TECHNICAL REPORT

2024



**POLICY ANALYSIS AND
PLANNING UNIT**

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FOREWORD



The Ministry of Health and Wellness presents this Annual Technical Report 2024 with great pride and commitment to transparency and progress. We recognize the tireless work of our diverse healthcare professionals to ensure that quality care is accessible to all. Their dedication and unwavering support have been instrumental in the significant progress.

This document reflects a year of resilience, innovation, and unwavering dedication to the health and well-being of our population. It provides a comprehensive overview of our technical achievements, highlights key data, and trends, and outlines the collaborative efforts that have driven impactful change across the health sector. It is a testament to the professionalism, sacrifice, and excellence of our healthcare workers, partners, and stakeholders, whose contributions make progress possible. While considering the evolution of our national health care system, we must not lose focus and continue our pledge to improve health outcomes for all people living in Belize while fast-tracking our progress towards #planBelize Medium Term Development Strategy, the Sustainable Development Goals 2030, and Horizon 2030.

Looking ahead, the MOHW aims to expand universal health coverage initiatives to ensure equitable access to quality care, strengthen public-private partnerships to enhance service delivery, improve data-driven decision-making through enhanced health information systems, increase focus on mental health services and NCD prevention strategies, and enhance disaster preparedness and response mechanisms for health emergencies. Additionally, we stand committed to ensuring adequate distribution of healthcare workers throughout the public health system while improving access to quality healthcare for all.

On behalf of the Ministry, I extend sincere gratitude to all those who have contributed to advancing our health agenda. Our shared vision and commitment equip me with the confidence that together we can overcome adversities and continue to make significant strides toward a healthier, empowered, and resilient country. Together, we will continue to build a system that not only heals but empowers individuals to live healthier lives.

Hon. Kevin Bernard
Minister of Health and Wellness

ACRONYMS

ART	Anti-Retroviral Therapy
BHIS	Belize Health Information System
CARICOM	Caribbean Community and Common Market
CDC	Center for Disease Control
CHR	Central Health Region
CHW	Community Health Worker
CML	Central Medical Laboratory
COMISCA	Council of Ministers of Health of Central America and the Dominican Republic
FETP	Field Epidemiology Training Program
GOB	Government of Belize
HIV	Human Immunodeficiency Virus
HRH	Human Resources for Health
HECOPAB	Health Education and Community Participation Bureau
IBBS	Integrated Biological and Behavioral Surveillance
IADB	Inter-American Development Bank
KMHM	Karl Heusner Memorial Hospital
MOHW	Ministry of Health and Wellness
MPS	Ministry of Public Service, Constitutional and Political Reform, and Religious Affairs
NDACC	National Drug Abuse Control Council
NHI	National Health Insurance
NHR	Northern Health Region

PAHO	Pan American Health Organization
PLHIV	People Living with Human Immunodeficiency Virus
PMTCT	Prevention of Mother-to-Child Transmission
PPE	Personal Protective Equipment
PPPMU	Policy, Planning, and Project Management Unit
QMS	Quality Management System
SHR	Southern Health Region
SDGs	Sustainable Development Goals
STIs	Sexually Transmitted Infections
UHC	Universal Health Coverage
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
WHO	World Health Organization
WHR	Western Health Region

EXECUTIVE SUMMARY

The Ministry of Health and Wellness (MOHW) aims to provide quality, affordable, comprehensive health services within a resilient environment that promotes equal health and well-being for all. To accomplish this, the Government of Belize, through the Ministry of Health and Wellness, continues its mission of rolling out the National Health Insurance, focusing on strengthening primary healthcare services, allowing for accessible and equitable health services for all Belizeans.

Hence, the Ministry of Health and Wellness's Annual Technical Report 2024 provides a comprehensive overview of Belize's healthcare landscape, achievements, insights, and future priorities. The report highlights significant progress in public health, service delivery, policy development and implementation, and strategic initiatives to strengthen the healthcare system.

In 2024, the MOHW made substantial advancements in improving healthcare accessibility and service efficiency across the different regions through the support of the Technical Advisors and the activities conducted by the various departments. Strengthening primary healthcare and increasing accessibility to essential services, particularly in rural and underserved areas, is pivotal. The continuous outreach mobiles address disease control and prevention with robust surveillance for communicable diseases through increased public awareness efforts.

The MOHW also recognizes the urgent need to improve health infrastructure while promoting sustainable healthcare practices, reducing carbon footprint, and mitigating health risks associated with environmental factors through policy interventions and public awareness campaigns. While Belize boasts a robust health education and community participation program, emphasis is placed on team building and the steadfast commitment of empowered individuals, communities, and families. Human resource capacity-building efforts allow for continuous training and recruitment of healthcare professionals to address workforce shortages and enhance service quality.

Despite progress, improved financing and human resources capacity, particularly in rural health services, will help address the rising burden of non-communicable diseases (NCDs), which require more targeted prevention and management strategies, and climate change-related health threats, including vector-borne diseases and natural disaster preparedness.

Nonetheless, attaining Universal Health Coverage and achieving our Sustainable Development targets will ensure equitable access to quality care through strengthened partnerships, improving service delivery, and data-driven decision-making through enhanced health information systems. It will also increase focus on mental health services and NCD prevention strategies, and increase disaster preparedness and response mechanisms for health emergencies.

Let this report serve as a roadmap for continuous improvement, ensuring Belize's healthcare system remains responsive, resilient, and people-centred. The Ministry remains committed to safeguarding public health and wellness for all Belizeans.

Vision:

Quality health care and well-being for all now and beyond.

Mission:

The Ministry of Health and Wellness aims to provide quality, affordable, comprehensive health services, within a resilient environment that promotes equal health and well-being for all.

Core Values:

- ♥ People-Centered Services
- ♥ Social Justice
- ♥ Equity
- ♥ Respect for human rights and individual dignity
- ♥ Accessible, Available, Affordable Health Care
- ♥ Leadership
- ♥ Transparency and Accountability
- ♥ Efficiency and Effectiveness
- ♥ Quality

As outlined in the previous Annual Technical Report 2023, the Ministry of Health and Wellness (MOHW) will focus on building a resilient health system over the next two years. This system will address challenges and adequately respond to health emergencies.

The main pillars to focus on as we move forward are:

1. Strengthen governing documents
2. Patient-centred care
3. Innovation and digital transformation
4. Strengthen climate resilience

This report is compiled from the Annual Health Region's and Technical Advisors' Reports, which provide insights into the accomplishments, lessons learned, and future priorities in all health system sectors.

MAIN ACHIEVEMENTS 2

Progress Report: Ministry of Health & Wellness

Outcome	Action
Strengthen primary healthcare services	Continue the roll-out of the NHI
	Reduce out-of-pocket expenditure
	Provide scholarships and financial aid to the Nursing Program
	Provide the package of services for the Elimination of Mother-Child Transmission (EMTCT) of HIV, Syphilis, and Hepatitis B at health facilities within the public, private, and NGO sectors.
	Engage CHWs to bridge the gap between healthcare facilities and communities.
Strengthen the Belize Health Information System to support evidence-based planning	Increase outreach mobile clinics
	Promote HPV testing among women 30-49 years of age
	Develop the Clinical Exchange Platform (information exchange interface for interconnectivity and interoperability between different source systems)
Strengthen Human Resources for Health	Develop the Data Warehouse and Analytics Platform (A central repository that stores aggregated, de-identified clinical data and supports epidemiological and research purposes)
	Recruitment of 129 CHWs
	Fill vacant posts and hire new personnel
	Develop a proposal and technical paper for nursing projections for new projects
Reduce mortality rates	Develop retention and allowance packages
	Reduce maternal mortality
	Reduce the under-5 mortality rate
	Reduce the adolescent birth rate
Strengthen Regulatory Frameworks	Increase public health interventions to reduce child mortality, e.g., immunizations, promotion of breastfeeding
	Launch the Belize National Suicide Prevention Plan 2024-2030
	Launch of the 2025 Community Health Workers Manual and Job Aid Tool
	Update all Laboratory Standard Operating Procedures
	Submit the National Tobacco Bill to the cabinet
	Launch Breastfeeding Policy 2024-2034
	Develop National Triage Policy
	Update the Food and Drug Regulations
Update and launch the Infant and Young Child Feeding Manual	
Strengthen the surveillance system	Implement hospital-acquired infection surveillance at the district level
	Updated the Communicable Disease Surveillance Manual
	Revised the Notifiable Diseases for Mandatory Reporting
Strengthen stakeholders' engagement and partnerships	Expand testing of food-borne diseases for S. Aureus and E. Coli 0157
	Partner and support from NGOs, local businesses, companies, and community village councils with NCDs and health and wellness
	Partner with PAHO on the Healthy Lifestyle Caravans to address the population's needs on the importance of healthy lifestyles.
	Continue the regional and international engagements, such as SE-COMISCA, UNICEF, IAEA, etc.

Table 1: Summary of the Ministry of Health & Wellness' Performance for 2024

2.1 Belize Health Information System- IT Unit

Coordination, collaboration, and partnerships:



- ♥ Collaborated with PAHO, Populus, and the European Union, among other stakeholders, on developing the Clinical Data Exchange Platform (CDEP).
- ♥ Launch of the Operation of the CDEP (an information exchange interface that allows for interconnectivity and interoperability between different source systems) and the Data Warehouse and Analytics Platform (A central repository that stores aggregated, de-identified clinical data and supports epidemiological and research purposes)- to strengthen evidence-based planning and healthcare service delivery by increasing interconnectivity and interoperability with health information systems in Belize.
- ♥ Full implementation of the appointment system across all regional hospitals with training by the Software & Support Officer.
- ♥ Integration of the Edinburgh Postnatal Screening Tool into BHIS- main features include universal access, enhanced monitoring, and improved efficiency.

Services provided:

- ♥ Maintain and provide Business Intelligence (BI) platforms for technical and management-level users.
- ♥ The Unit adopted the policy of providing each region with the opportunity to use a full-time training officer for introduction to the BHIS and/or strengthening use for previous users
- ♥ Continuous training to healthcare personnel at all levels across the country through virtual platforms and in-person sessions, ensuring accessibility and inclusivity and empowering them to maximize the use of the BHIS system, improving efficiency and enhancing patient care.



2.2 Dental Unit



Coordination and Collaboration:

- ♡ Collaborated with a Taiwan voluntary group to offer services such as fillings, cleaning, x-rays, and medication to 605 patients
- ♡ New recruitment of dentist for Matron Roberts Health Center
- ♡ Ensure availability of a tent as a waiting area for Cleopatra White Polyclinic

Capacity Building:

- ♡ Virtual CME on Mesiodents provided to staff
- ♡ HEARTS Initiative Blood Pressure Measurement Course for all staff
- ♡ Emotional Intelligence Training through Beltraide was provided to staff at the annual dental workshop

Services offered:

- ♡ The Dental Education program dramatically increased to 11962 in 2024 compared to 8406 patients in 2023.
- ♡ Outpatient care program increased from 13,434 patients in 2023 to 14,474 in 2024.
- ♡ MCH Program increased from 1,327 pregnant mothers in 2023 to 1,966 in 2024.
- ♡ Mobile outreach program increased from 4,407 patients in 2022 to 11,120 in 2024.

2.3 Drug Inspectorate Unit

Policy and legislation:

- ♡ Drafted three SOPs: *Community Pharmacy Inspection Guidelines, Drug Registration, and Licensing of Pharmaceutical Establishments*
- ♡ Significant progress in the updating of the Food and Drugs Regulation
- ♡ Initiated revision of the Over-the-Counter Medicine List- to ensure appropriate classification of non-prescription medicines for public access

Regulatory Data Management and Digitalization:

- ♡ Established dual systems of data saving, ensuring accessibility for future use.
- ♡ Improved utilization of online spreadsheets and shared folders to enhance workflow and facilitate data retrieval for regulatory decision-making.



Advocacy:

- ♥ Assisted in hosting World Antimicrobial Awareness Week (WAAW) activities, including three high school education sessions and one public open day, raising awareness on antimicrobial resistance (AMR).
- ♥ Engaged stakeholders in the “I Pledge” campaign, promoting responsible antimicrobial use across human, animal, agricultural, and environmental health.
- ♥ Led a social media campaign for Med Safety Week, increasing public awareness of medication safety and pharmacovigilance.

Collaboration:

- ♥ Strengthened collaboration with the Pharmacy Unit to identify Substandard and Falsified Medical Products on the market and ensure appropriate regulatory action.
- ♥ Detected and removed Substandard and Falsified Medical Products with the assistance of international pharmaceutical laboratories and manufacturers

Coordination and partnerships:

- ♥ Active participation in Pharmacovigilance Programs (WHO VigiBase, VigiCarib and Noti-FACEDRA)
- ♥ Consultations with regional NRAs- to seek guidance on the registration status of pharmaceuticals with contract modifications

Capacity Building:

- ♥ Training on the use of FACEDRA Reporting Platform- focuses on pharmacovigilance reporting
- ♥ Self-paced regulatory courses on Pharmacovigilance- support the development of a stronger medicine safety system
- ♥ Participated in ‘PAHO Regulación Sanitaria de Productos Médicos Course’ on medical product regulation

Services offered:

- ♥ 81 Retail inspections conducted: Corozal (4); Orange Walk (9); Belize (39); Cayo (19); Stann Creek (5); Toledo (2)
- ♥ 26 Wholesale/import inspection licenses conducted: Corozal (3); Orange Walk (5); Belize (10); Cayo (7); Stann Creek (1)
- ♥ 38 Investigative inspections conducted: Corozal (4); Orange Walk (8); Belize (13); Cayo (8); Stann Creek (13); Toledo (1)
- ♥ 194 Supermarket inspections conducted: Corozal (48); Orange Walk (50); Belize (5); Cayo (41); Stann Creek (27); Toledo (23)

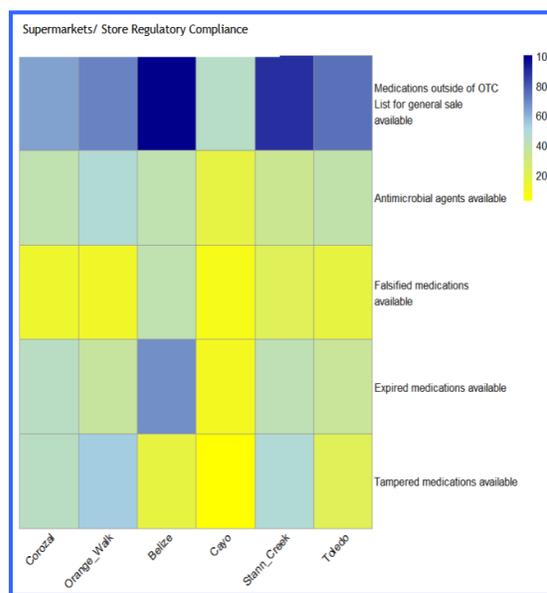


Figure 1: Compliance Status of Supermarkets Regarding Pharmaceutical Product Sales by District.

2.4 Environmental Health Unit

Policy and legislation:

- ♥ Restarted the Public Health Act review to streamline new responsibilities of International Health Regulations (IHR), One Health, Climate Change, and other international obligations.
- ♥ Collaborated in finalizing the last Health National Adaptation Plan (H-NAP) draft.

Coordination and partnerships:



♥ Participated in Caribbean Disaster Emergency Management Agency (CEDEMA) Audit Validation for Belize with the National Emergency Management Organization (NEMO)- to assess Belize's disaster management capabilities across all phases (mitigation, preparedness, response, and recovery) and to validate the findings of the CDM Audit.

- ♥ Supported the establishment of Funeral Homes and Undertaker Association.
- ♥ Engaged with the Pharmacy Unit in the procurement process of supplies as per agreed tender.
- ♥ Completed WHO's survey on contributions to Health Water, Sanitation, Hygiene (WASH), and Health with a dual purpose of accountability and learning, identifying good practices and opportunities for improvement.
- ♥ Supported the Track Fin and GLASS Assessment

Stakeholder engagement:

- ♥ Participated in monthly National Port Community Council meetings to prepare for the Maritime Single Window (MSW) implementation (large vessels only).
- ♥ Participated in Recyclers and Waste Management Association Networking Session to increase exposure between service providers and users and established an association for waste management supply chain to a new level through the collaboration of inventive services.
- ♥ Conducted the Annual Health Cluster meeting, which provides a forum to discuss humanitarian response, share best practices and resources, and improve crisis coordination.
- ♥ Completed e-SPAR assessment of Belize's achievement of its core capacities to prevent, detect, and respond to public health threats using a multisector approach.



Training:

- ♥ 8 New Public Health Inspectors were trained in water testing and sampling countrywide.
- ♥ Strengthen outbreak investigations and food safety capacity by including One Health in the Field Epidemiology Training conducted by the Epidemiology Unit.
- ♥ Received training on the assessment of Carbon Footprint in Healthcare Facilities through PAHO
- ♥ Conducted training in Water Safety and management of human remains (funeral homes and undertakers)

Services offered:

- ♥ 347 sampling sites were documented and monitored for the National Drinking Water Quality Program in Belize
- ♥ 3,632 water samples were collected, tested, and analyzed for compliance with biological and chemical parameters- Northern Health Region (1099), Central Health Region (1143), Western Health Region (882), Southern Health Region (508)
- ♥ 3,443 bacteriological samples were collected in Urban (1,368) and Rural (2,075) areas, with 28.3% testing positive for coliform contamination and 71.7% testing negative.

2.5 Epidemiology Unit



Policy and legislation:

- ♥ Updated STI's Manual
- ♥ Updated Terms of Reference for Surveillance Committees
- ♥ Completed first draft of the Viral Respiratory Disease Surveillance Protocol (review and approval pending)
- ♥ Developed an Interim Surveillance Guideline: Monkeypox
- ♥ Updated the Communicable Disease Surveillance Manual
- ♥ Revised the Notifiable Diseases for Mandatory Reporting

Investigation and Publication:

- ♥ One Health Investigation conducted: “One Health Investigation of Leishmaniasis, Arenal Village and Surrounding Areas, September 2024, Cayo District, Belize.” One Health FETP field investigation led to the 4th report of animal Leishmaniosis in Belize to the World Organization of Animal Health (WOAH).
- ♥ Manuscript Published in American Journal of Field Epidemiology (Prevalence and Cluster Analysis of SARS-CoV-2 Variants of Concern, Belize, August 2021-July 2022, (Aldo Ivan Sosa, main author) DOI: <https://doi.org/10.59273/ajfe.v2i1.8413>



Innovation and Collaboration:



- ♥ Configuration and Installation of the HIV patient monitoring tool of PLHIV navigating the HIV Care Continuum at all district facilities

- ♥ Configuration and Installation of HIV prevention Services Tool to improve prevention and strengthen linkage to HIV services

- ♥ Data validation and cleaning of the Lost to follow up Cohort to guide

programmatic decisions

- ♥ A situational analysis was conducted and completed in collaboration with PAHO and the University of Miami Staff to identify potential factors impacting linkage and engagement to care and adherence to ART.
- ♥ Improved collaboration with the district team to strengthen the differentiated services model as Multi-month Dispensation, ART drop off, and decrease unnecessary clinic visits
- ♥ In collaboration with PAHO, surveillance of Advanced HIV Disease is in discussion for the monitoring of fungal infections and Tuberculosis via the introduction and use of point-of-care tests

Stakeholder engagement and partnerships:

- ♥ Prioritization Zoonotic Workshop: established collaboration among key ministries under the One Health approach; Ministry of Agriculture, BAHA, Ministry of the Environment, UN agencies (PAHO), COMISCA
- ♥ Strengthening support between the National AIDS Commission, MOHW, and its stakeholders in achieving 95-95-95 goals; funding through the Global Fund
- ♥ Continued support and funding from COMISCA for the Field Epidemiology Training Program (introduction of the OH Curriculum)

Capacity building:

- ♥ Participated in the Pan-American Highway Connectathon, which aims to standardize data among countries for easier data-sharing.
- ♥ Regional Mosquito-Borne Diseases Workshop on 'Networking for Improved Responsiveness'- to enhance regional responsiveness to mosquito-borne diseases like dengue, chikungunya, Zika, and emerging arboviruses.



- ♡ “Respondent Driving Sample” (RDS) for Biobehavioral Surveys (IBBS) in Key Populations- training in using RDS-Analyst Tool to analyze data gathered from key populations and to provide participants with a working tool and demo database of the RDS-Analyst and NetDraw.
- ♡ Eastern and Southern Caribbean Health Information System Learning Exchange- Enhancing knowledge on addressing contextual factors that influence the progression of country health information systems (HIS); to identify digital transformation catalysts that can aid Caribbean countries in responding to the findings of Information Systems for Health (IS4H) assessments; to facilitate discussion on regional standards for HIS and data use
- ♡ Caribbean Connect: Building the Pan-American Highway for Digital Health- to provide participants the opportunity to learn from the experiences and successes of peers in Health Information Systems in the region; to present on digital health experiences and successes; to lead discussions with CARICOM colleagues on specific technical or strategic topics in digital health
- ♡ Completed training on 4th Cohort, First FETP One Health Frontline
- ♡ Field Epidemiology Training Program (FETP) Frontline-One Health, Trainer of Trainers Facilitator Training- to train government representatives from ministries of human, animal, and environmental health in the region on the new ONE HEALTH FETP methodologies to prepare, conduct, and facilitate future workshops in their countries prior to implementing the new curriculum for future Frontline-ONE HEALTH cohort in Belize.

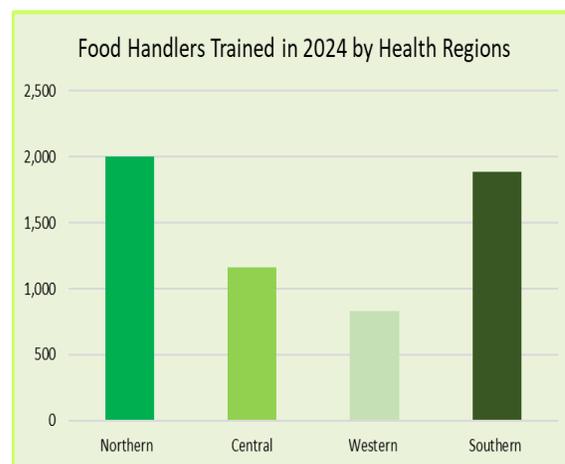
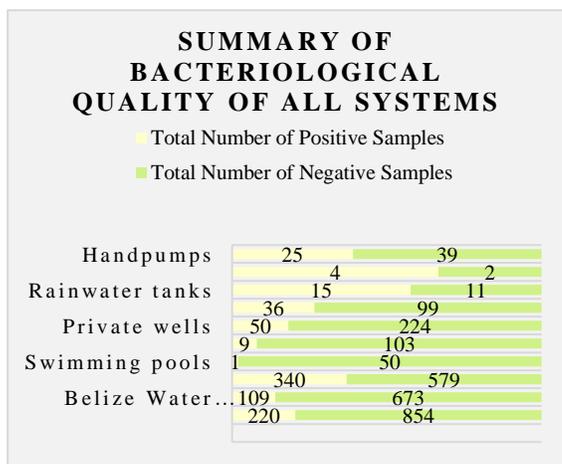


Figure 2: Summary of Bacteriology Quality of All Systems **Figure 3:** Food Handlers Trained in 2024 by Health Region

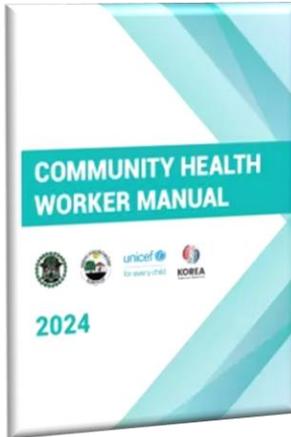
2.6 Health Education and Community Participation Bureau

Policy and legislation:

- ♡ Design and launch the 2025 CHW Manual and Job Aid Tool for CHWs.

Innovation:

- ♡ Updating the list of active Community Health Workers using the Geo-Information System (GIS) Mapping of CHW



♡ Digitalization of community health information collected by CHWs through the pilot use of tablets to collect information from home visits and the utilization of digital data on a wider dashboard for the design of interventions at the communities and policy development.

Capacity building:

♡ Recertification of CHWs for all districts through refresher training

♡ The Technical Advisor and Health Educator participated in the COMISCA REDCOM and Health

Promotion working groups to strengthen communication strategies regionally, including in new areas such as Non-traditional Chronic Kidney Disease.

♡ Two Health Educators received training in Taiwan on Contraceptives Counselling skills

♡ Two Health Educators completed the Field Epidemiology Training Program (FETP).

♡ Health Educators receive health promotion training via the PAHO virtual platform

♡ CHWs can conduct their activities independently by catchment areas. This demonstrates empowerment and ownership of the CHW Program.

♡ Recruitment of 129 new volunteers countrywide: Corozal (17), Orange Walk (17), Belize (19), Cayo (23), Stann Creek (19), and Toledo (32).



Stakeholder engagement and partnerships:



♡ The Healthy Caravan Phase II took place countrywide, including in Dolores, Toledo, as an effort by partners (PAHO) to address NCD risk factors.

♡ CHWs supported vaccination campaigns in their communities by mobilizing the community.

♡ Partnership and support from NGOs, local businesses, companies, and community

village councils with NCDs and health and wellness

- ♥ Several health screening sessions for schools, private entities, and workplaces have created an increased awareness of the risk factors of NCDs.
- ♥ Partner with PAHO to host countrywide Healthy Lifestyle Caravans to address the population's needs on the importance of healthy lifestyles.



Services offered:



- ♥ Health education and promotion in schools: Corozal (713), Orange Walk (1890), Belize (617), Cayo (1148), Stann Creek (1078), and Toledo (990).
- ♥ Health education and promotion in hospitals and health centres: Corozal (194), Orange Walk (328), Belize (122), Cayo (176), Stann Creek (98), and Toledo (143).
- ♥ Health education sessions within the community: Corozal (479), Orange Walk (2060), Belize (105), Cayo (2108), Stann Creek (837), and Toledo (680).
- ♥ Home visits: Corozal (6570), Orange Walk (9949), Belize (4445), Cayo (10,024), Stann Creek (6292), and Toledo (7052).
- ♥ Supervisory visits to CHWs: Corozal (31), Orange Walk (79), Belize (52), Cayo (82), Stann Creek (21), and Toledo (87).
- ♥ Health fairs: Corozal (36), Orange Walk (22), Belize (28), Cayo (58), Stann Creek (48), and Toledo (4).
- ♥ Wellness day activities: Corozal (79), Orange Walk (75), Belize (46), Cayo (113), Stann Creek (54), and Toledo (20).
- ♥ Clean up campaigns: Corozal (7), Orange Walk (12), Belize (5), Cayo (13), Stann Creek (30), and Toledo (78).
- ♥ Health education on diabetes: Corozal (276), Orange Walk (170), Belize (105), Cayo (1637), Stann Creek (121), and Toledo (169).
- ♥ Health education on tobacco cessation: Corozal (36), Orange Walk (4), Belize (0), Cayo (0), Stann Creek (6), and Toledo (2).



2.7 Laboratory Unit

Policy and legislation:

- ♥ Developed new Training Manuals in the following units: Blood Bank, Serology, Molecular biology (PCR), Hematology, Chemistry, Microbiology, Pathology
- ♥ Revised the National Blood Bank Quality Policy (pending approval)
- ♥ Developed HIV Qualitative (DBS) Standard Operating Procedure
- ♥ Developed Arbovirus Standard Operating Procedure
- ♥ Updated all lab Standard Operating Procedures
- ♥ Technical review of algorithms and guidelines to detect arboviral diseases



Coordination:

- ♥ Strengthened surveillance of food-borne diseases by expanding testing for S. Aureus and E. Coli 0157
- ♥ Implementation of Mycology testing
- ♥ Improve storage facility through the procurement of two new storage containers retrofitted with a ramp, shelves, and air conditioning
- ♥ Implemented arboviral testing using RT-PCR
- ♥ Conducted a CML baseline accreditation (QMS) assessment in compliance with the revised ISO 15189:2022 Standard, towards advancing to accreditation.
- ♥ Conducted a QMS Training in compliance with the revised ISO 15189:2022 Standard
- ♥ Increase Human Resources: 4 new phlebotomists, 1 Quality Assurance Coordinator, and 1 Quality Improvement Officer (contract)

Stakeholder engagement and partnerships:

- ♥ Supported CML with acquiring supplies and reagents to strengthen the diagnosis and surveillance of COVID-19, influenza, other respiratory viruses, Dengue, and other testing already implemented in the CML.
- ♥ Supported training of one (1) laboratory personnel on real-time Polymerase Chain Reaction (PCR) testing to identify Candida auris.
- ♥ Supported implementing a conventional Reverse Transcription Polymerase Chain Reaction (RT-PCR) with on-site training in the laboratory.
- ♥ Supported coordinating and sending COVID-19 samples for sequencing to Panama or Costa Rica.
- ♥ Support with the virtual reality training module (biosafety cabinet).
- ♥ Global Fund donated numerous testing kits, e.g., XPERT HIV KIT, etc.



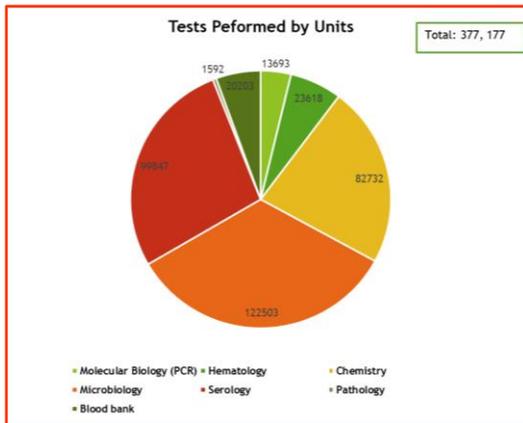


Figure 4: Number of Lab Tests Performed by Units

Services offered:

- ♡ Pathology Unit: 1592 biopsies received; KHMH sent 44% of the total biopsies (697 samples).
- ♡ Serological tests: 99,837; immunological tests: 86,785 with the highest frequency: HIV -1 antigen & total antibody test with 15,881 tests.
- ♡ 13 062 Rapid Diagnostic Testing with rapid plasma reagin, having the highest frequency with 11 116 tests.
- ♡ 13,693 tests for Molecular Biology (PCR) Unit with the highest frequency: real-time PCR (Influenza):

- 1,933 reactions.
- ♡ 82,732 tests done at the Chemistry Unit, with Creatinine (8,597) having the highest frequency.
- ♡ 23,618 tests done at the Hematology Unit with full Blood Count (9,559) with the highest frequency.
- ♡ Microbiology Unit (135,492 tests) with urinalysis (12,139 tests), parasitology (850 tests), and microbiological tests (122,320), with the highest frequency seen with Culture/Sensitivity (101,320 tests).
- ♡ 4638 blood units were collected and used, with 20,2043 tests done, and the highest frequency with total Antibody Tests (7113).

2.8 Licensing and Accreditation Unit

Policy and standards:

- ♡ Develop draft funeral homes’ standards for licensing, to strengthen services and public health standards.
- ♡ Finalized the telemedicine guideline for licensing.
- ♡ Finalized and presented the National Action Plan, Antimicrobial Resistance (AMR) costed plan for Belize.
- ♡ Implementation of hospital-acquired infection surveillance at the district level.



Stakeholder engagement and partnerships:

- ♡ Conducted World Antimicrobial Resistance Awareness Week activities with stakeholders and PAHO countrywide.

- ♡ Conducted and assessed imaging equipment across public and private health facilities with the Department of Environment using IAEA guidance to review radiation safety measures and prevention.
- ♡ Improve the Infection Prevention and Control hand hygiene system by implementing the Water and Sanitation for Health Facility Improvement Tool in selected health facilities.

Capacity building:



♡ Participated in a Regional Training Course on Nuclear Safety and Security focusing on radiation protection and the regulatory frameworks necessary to ensure safe practices in facilities utilizing nuclear technology.

♡ Participated in the National Quality Assurance (QA) Manual Implementation training for diagnostic imaging, aimed at improving the quality and safety of radiological practices in Belize

- ♡ Attended a refresher session at the Department of the Environment focused on the Regulatory Authority Information System, with an overview of the system to populate the software with data from the MOHW and private sector diagnostic imaging equipment inventory.

Services offered:

- ♡ 159 applications for health facilities licenses were received; 100% of the facilities were inspected, of which 97.5% were approved
- ♡ Allied health certification approvals- 95.7%, mainly EMTs, Laboratory Technologist/Scientist, Physician Assistant, and Physical Therapists (n=111/233 = 53%). 41% were professionals from the medical laboratory who practice at different public and private sector health facilities.
- ♡ Increased occupational safety and quality assurance of allied health professionals across MOHW facilities, KHMHA, and the private sector. This was executed via continuing education (CE) sessions organized for laboratory and diagnostic imaging personnel.

2.9 Maternal and Child Health Unit

Awards and Milestones:

- ♥ Belize obtained a third-place award for the Expanded Program on Immunization (EPI) surveillance indicators among countries in the English-speaking Caribbean countries; 100% of suspected vaccine-preventable diseases (VPD) were investigated and discarded.

- ♥ The MOHW approved the introduction of Rotavirus and Hexavalent vaccines to be rolled out in 2025.

- ♥ The maternal mortality rate reduced from 79 to 17 / 100,000 Live Births in 2023 and 2024, respectively (303 days after the last case in 2023).

- ♥ The under-five mortality rate was reduced from 19.1 to 18.7 / 1000 Live Births; there was a 2.0% reduction (121/107); no under-five death was due to vaccine-preventable diseases.

- ♥ The adolescent birth rate (ABR) reduced from 22.3 to 20.6 / 1000 Females aged 15-19 years



Capacity building:

- ♥ Kangaroo Mother Care (KMC) training for 74 HCWs from the four health regions.
- ♥ Visual assessment and triage (VAT) was introduced with 11 Medical Practitioners and Nurses from the four health regions trained
- ♥ Forty-one percent of women with a positive HPV test result had a follow-up check to guide their management plan

Coordination and partnerships:

- ♥ Technical assistance from UN Agencies (UNICEF, PAHO, UNFPA).
- ♥ Training in long-acting reversible contraceptives (LARCs) methods for HCWs with facilitators from UNFPA and Organon.

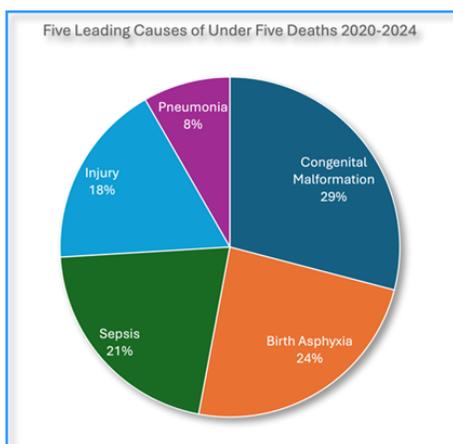


Figure 5: Five Leading Causes of Under Five Deaths 2020-2024

Statistical analysis:

- ♥ An 80.3% ratio reduction in **maternal mortality** from 71 to 14 / 100,000 live births (LB) in 2023 and 2024, respectively.

- ♥ Comparing the maternal deaths 2 years before the pandemic and 2 years after the pandemic, the number of maternal deaths reduced from 19 to 10 cases, respectively.

- ♥ The **under-five mortality rate** decreased from 19.1 to 18.7/1,000 LB in 2024 compared to 2023. 60.0% of the total under-five deaths occurred in the neonatal period, and 44.0% occurred in the early neonatal period (0-6 days).

- ♡ 360 neonatal complications occurred in 2024, with the most common being: Low Birth Weight 271 (4.7%), Prematurity 186 (3.2%), severe birth asphyxia 16 (0.3%), and severe neonatal sepsis 31 (0.5%).
- ♡ Three hundred forty-seven (347) medical records were audited, of which 76.0% were managed as per protocols.
- ♡ The MOHW continues to promote HPV testing among women 30-49 years of age, with a focus on women between 35- 45 years of age (1,865 women tested positive for HPV infection).
- ♡ The package of services for the Elimination of Mother-Child Transmission (EMTCT) of HIV, Syphilis, and Hepatitis B is provided at health facilities within the public, private, and NGO sectors.
- ♡ The leading five causes of under-five deaths are congenital malformations, birth asphyxia, sepsis, injury, and pneumonia. 48.0% of the total under-five deaths are caused by or related to being born too soon (prematurity); 69.0% are children residing in rural communities. In 2024, the proportion by ethnicity is Mestizo 43%, Creole 25%, Maya 13%, Garifuna 5%, and others 14% (the majority are Mennonite).
- ♡ Other public health interventions to reduce child mortality, e.g., immunizations, deworming, vitamin A supplementation, multivitamin supplementation, promotion and protection of breastfeeding, child growth and development monitoring, and delivery of fortified food for families with children with unsatisfactory growth for age are ongoing.

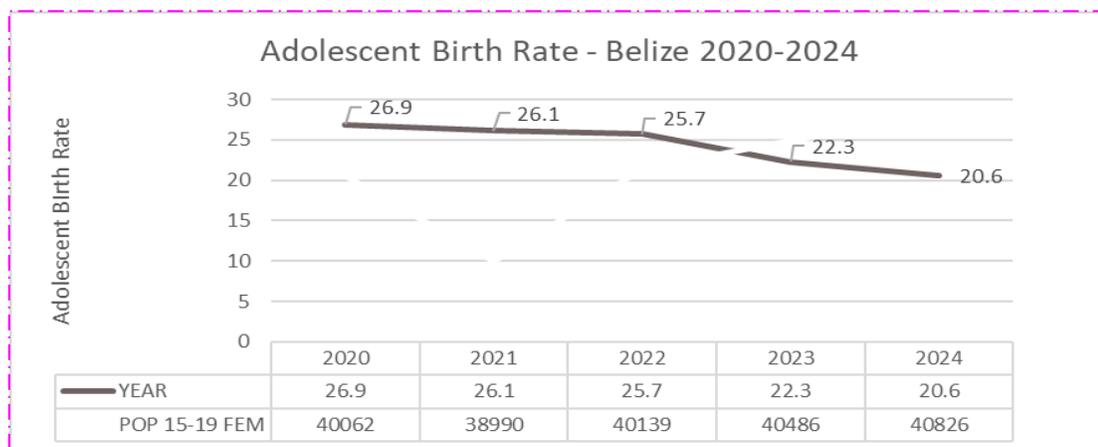


Figure 6: Adolescent Birth Rate in Belize 2020-2024

2.10 Mental Health Unit



Policy:

- ♡ Developed and launched the Belize National Suicide Prevention Plan (2024 – 2030) with PAHO’s support
- ♡ Initiated the review and updating of the Mental Health Act with technical support from PAHO.
- ♡ Sensitized health professionals and stakeholders on the National Mental Health Policy (2023-2028)

Collaboration and Stakeholder Engagement:

- ♡ Continuous collaboration with Mt. Sinai, New York, to strengthen the capacity of mental health services by providing specialized training to nurses and medical officers on psychiatric emergencies..
- ♡ Collaborated with the Nutrition Unit on healthy habits training
- ♡ Collaborated in gender-based violence and trafficking of persons- psychological support for survivors of violence in the emergency area.
- ♡ Collaborated with the national special needs and disability committee
- ♡ Partnered with UNICEF to conduct comprehensive Perinatal Mental Health Training and received support with laptops, projectors, and cellular phones, which will significantly improve service delivery
- ♡ Participated in the Central American Suicide Observatory with COMISCA
- ♡ Provided support to UNICEF for the MICS Survey, inclusive of a mental health component
- ♡ Collaborated in wellness week activities
- ♡ Conducted a Training of Trainers: Mental Health Gap Action Program (mhGAP) with the support of PAHO



Community Engagement:



♡ Celebrated World Suicide Prevention Day- theme: “Changing the narrative on suicide”- activities including glow run and walk, pledges, wearing of yellow, raising of the flag, lighting of the candle at home, live, at WRH, walkathons, educational sessions (BDF, Schools, Villages), media Sessions (TV and radio), Tik Tok videos (English and Spanish), bike rides, backdrop competition

♡ Celebrated World Mental Health Week- theme: “It is time to prioritize mental health in the workplace”- activities

such as yoga, meditation, massage, and dance sessions etc.

2.11 National Drug Abuse Control Council (NDACC)



Survey- provides critical data on tobacco use among youth, guiding targeted interventions and policies to reduce youth tobacco consumption; supports evidence-based planning and decision-making.

Policy and Legislation:

- ♥ Completed and submitted the Draft National Tobacco Bill to Cabinet- aims to align Belize's policies with international best practices in reducing tobacco use and protecting public health.
- ♥ National Tobacco Forum- launched the updated National Tobacco Control Action Plan and fostered commitments to strengthen smoke-free environments, enhance enforcement, and promote public awareness.
- ♥ Completed the Global Youth Tobacco

Coordination and Partnership:

- ♥ Strengthened partnerships with Rehabilitation Facilities and the National Prison- underscore NDACC's commitment to holistic support for individuals on their journey to recovery.
- ♥ Regional and international engagement- reflects the council's dedication to adapting evidence-based strategies to local contexts.
- ♥ Coordinated the Multilateral Evaluation Report- highlights the ability to manage complex evaluations and contribute valuable insights to regional initiatives.
- ♥ NDACC-MOHW-UNICEF Project- led to successfully implementing a pivotal initiative addressing substance abuse prevention in Belize; established school gardening programs as a coping mechanism and healthy living practices in six schools across the Stann Creek and Toledo Districts. The project facilitated extensive training for educators, CHWs, and local stakeholders on substance abuse prevention strategies, building capacity at the grassroots level.



Offered Services:

- ♥ Community Empowerment (150 at National Level - 98 Urban, 42 Rural): Corozal (36), Orange Walk (36), Belize (33), Cayo (17), Stann Creek (15), and Toledo (13).



conferencing.

♥ Outreach Services (342 Cases - 242 Males, 100 Females): Corozal (36), Orange Walk (65), Belize (104), Cayo (68), Stann Creek (44), and Toledo (25).

♥ Substance Abuse Prevention Education: Corozal (4039), Orange Walk (5307), Belize (1786), Cayo (550), Stann Creek (15), and Toledo (1872).

♥ Telehealth Outreach Services: 38 clients; Belize is the primary district utilizing telehealth outreach services for substance abuse, leveraging telephone and video

Capacity Building:

♥ *International Training:* through PAHO, the Inter-American Drug Abuse Control Commission (CICAD), and the Organization of American States (OAS) on evidence-based prevention strategies, rehabilitation protocols, and policy formulation.

♥ *Regional Workshops:* through forums like the Co-operation Program between Latin American countries and the European Union on Drugs Policies (COPOLAD) and OAS, which have allowed NDACC to align its efforts with regional strategies, ensuring a cohesive approach to tackling substance misuse in Latin America and the Caribbean.

♥ *National Training:* on topics such as community engagement and gender-based violence, equipping staff with the skills to address challenges specific to Belizean communities.

♥ *Community Health Workers (CHWs):* Numerous training sessions on substance abuse prevention, early intervention, and referral systems were conducted to empower CHWs to serve as frontline community advocates.

♥ *School-Based Training:* effectively tailored for educators and school counselors to equip them with the tools to address substance misuse among students with topics such as life skills education, coping mechanisms, and creating drug-free environments.

♥ *Collaborative Efforts:* with law enforcement agencies and NGOs to facilitate training on topics like talk therapy, road safety, and addressing social determinants of substance misuse



2.12 National Engineering and Maintenance Center (NEMC)

Services offered:

♥ Installed Mammography Unit at Western Regional Hospital.



- ♡ Installed 3 X-ray Units at Northern Regional Hospital, Southern Regional Hospital, and San Ignacio Community Hospital.
- ♡ Completed preventive maintenance service of mission-critical biomedical equipment for all four health regions.
- ♡ Completed preventive service to mission-critical A/C equipment for the Central Health Region.
- ♡ Completed preventive service to mission-critical generators for Central Health Regions.
- ♡ Installed CR Readers for Western Regional Hospital, Independence Polyclinic, Punta Gorda Community Hospital, and San Pedro Polyclinic- 100% digital x-ray.
- ♡ Completed medical waste sterilizer equipment installation for Northern Regional Hospital, Southern Regional Hospital, Western Regional Hospital, and San Ignacio Community Hospital.
- ♡ Completed medical incinerator installation at Caye Caulker transfer station.

Capacity Building:

- ♡ Provide training on the maintenance web application using the National Engineering and Maintenance Center maintenance website. Web applications are used at San Antonio Polyclinic, Punta Gorda Community Hospital, Southern Regional Hospital, Palm Center Nursing Home, Western Regional Hospital, San Ignacio Community Hospital, National Engineering and Maintenance Center, Northern Regional Hospital, and Corozal Community Hospital to record maintenance works.
- ♡ Provided training to Northern Regional Hospital, Southern Regional Hospital, Western Regional Hospital, and San Ignacio Community Hospital Staff on medical waste sterilizer use.
- ♡ Provided training to staff at the Caye Caulker transfer station.
- ♡ Participated in the Ministry of Health and Wellness Quality Assurance Training



Collaboration:

- ♡ Assisted the Ministry of National Security/ National Forensic Laboratory with medical equipment repairs.

2.13 Nursing Unit

Guideline development and proposal:



- ♥ Completed, approved, and socialized the National Medical Mission Guidelines 2024. The office of the Deputy Director of Hospital Services and Allied Health Nursing received and reviewed sixty-five (65) Voluntary Medical Mission applications.
- ♥ Developed a proposal and technical paper for the nursing projections requirement for the two new hospitals (Belmopan and San Pedro), including the five-year training plan for nursing.
- ♥ Develop a proposal and draft cabinet paper for the nurses' retention and allowance package.

Capacity Building:

- ♥ A cohort of 4 nurses was provided with a scholarship for the master's in public health nursing at the University of Science and Technology in Jamaica, and two nurses returned in 2024 with a bachelor's in public health nursing.
- ♥ Annually, MOHW issues 15 Registered Nurse Scholarships in partnership with MOE, including tuition by MOE and fees by MOHW. Each student is required to sign a bond with the MOHW. This bonding policy was updated to extend the years committed to service after completion. This was done as a means of increasing the retention of nurses.
- ♥ Issued six scholarships for the Licensed Practical Nursing Program at the University of Belize (including tuition and fees); commenced in August 2024 and lasted for eighteen months.
- ♥ A stipend program to support thirty (30) students in the Nursing program requiring some financial assistance to complete their nursing education. The stipend is \$400 monthly, and students must maintain a GPA of 2.5 and above and provide evidence of an actual need for this support.

PRACTICAL NURSING SCHOLARSHIP

REQUIREMENTS:

- Complete attached application form
- Grade Point Average of 2.8 and above
- Transcript from previous educational institution
- Certificate from High School/ Associate degree in Science
- Social Security card
- Acceptance letter from UB
- Birth Certificate or Passport
- Police Record
- One Passport sized picture
- Reference letter from a teacher and employer
- Must be Belizean

Apply by: July 29, 2024

Government of BELIZE

MINISTRY OF HEALTH AND WELLNESS

Coordination, Collaboration, and Partnerships:

- ♥ The Ministry of Health and Wellness and the University of Belize signed an agreement to train 18 Registered Nurses in Midwifery. This is cohort four, and its expected completion is 25 April 2025.
- ♥ Collaborated with the Belize Cancer Society, Nurses, and Midwives Councils of Belize in a National Nursing Cancer Forum. Over 150 nurses attended the nursing education session.



♥ Nurses Week was celebrated, and nurses were taken to Goff's Caye for a fun and relaxing day. The regions also conducted different activities for the nurses and appeared in the media to promote nursing.

♥ Completion of the Nursing budget for the 2025-2026 fiscal period.

♥ Development and execution of the Nursing Annual Operational Plan.

♥ Belize hosted the Regional Nursing Body's annual general meeting. This meeting

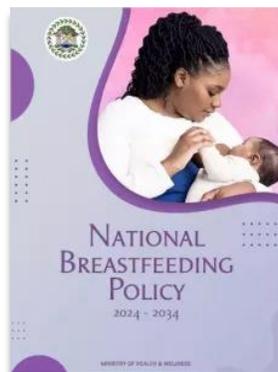
provided a report and update on the regional nursing education and practice standards. This policy document concerns the request to the Council for Human and Social Development (COSHOD) to approve the fourth sitting of the Regional Examination for Nurses' Registration (RENr).

♥ Belize participated in the Health Labor Market Training session for healthcare workers in the Caribbean. It was a regional-level session via the HRH Caribbean Commission, which Belize chaired from 2022 to March 2024.

2.14 Nutrition Unit

Policy:

- ♥ Updated the Infant and Young Child Feeding Manual used in Belize. Launch and Sensitization session for stakeholders
- ♥ Finalized and launched the Breastfeeding Policy (2024-2034)



Coordination, Collaboration, and Partnerships:



♥ Coordinated stakeholder sessions for the finalization of the Breastfeeding Policy (with our partners)

♥ Organized a national-level breastfeeding committee (to oversee and implement actions from the Breastfeeding Policy)

♥ Coordinated and supported national activities for the countrywide launch of Healthy Habits Healthy Schools, and Healthy Belize Initiative (task force meetings, reels, documentaries, district-level activities)

- ♥ Organized and coordinated Healthy Habits, Healthy Schools, Healthy Belize Task force trainings, and unit meetings for the Support of the Scale-up of the Healthy Habits Program
- ♥ Supported National Dietary Unit Training – to support cooks, dietary supervisors, and nutritionists
- ♥ Supported the Launch of the “Love your Heart” campaign along with nutrition-related activities countrywide
- ♥ Supported School Feeding Promotion activities in collaboration with the Ministry of Education. (OAS Healthy Environments Project, and Water Campaign in schools and Committee meeting
- ♥ Supported and coordinated refresher Nutrition training for the first 1000 days of training with community health workers countrywide



- ♥ Supported National Continuous Professional Development Trainings for 90 teachers in Belize District, Orange Walk, and Stann Creek
- ♥ Supported training and activities with Cash Plus Nutrition Project for Toledo (organize meetings, field visits in Toledo, and training manual)
- ♥ Organized stakeholder sessions for Nutrition in Emergencies (support for nutrition in emergencies and natural disasters)
- ♥ Organized and coordinated the Nutrition Policy Evaluation Session and Nutrition Operational Plan Session with the Nutrition team
- ♥ Organized & coordinated Shopping for Health Series (draft scripts and supported the production of 7 videos for nutrition promotion of local foods)
- ♥ Organized and Coordinated “In Ya Kitchen Cooking Show” (5 episodes) designed for nutrition promotion



Advocacy:

- ♥ Coordinated and supported the Wellness Forum for Dangriga and support wellness activities associated with Wellness Week
- ♥ Coordinated Activities for Health Days (Hypertension Day, Fruit Day, Breastfeeding Month, Wellness Day, World Food Day, and World Diabetes Day)

Stakeholders Engagement:

- ♥ Healthy Habits, Healthy Schools, Healthy Belize Initiative with collaboration from the Ministry of Education

- ♥ Cash Plus Nutrition Project with support from UNICEF
- ♥ School Feeding Project Collaboration, with the technical committee training (Collaboration with Food and Agriculture Organization, MOE)
- ♥ Training with PAHO, INCAP, and UNICEF for IYCF manual - Sensitization and training for all Community health workers and Health care personnel
- ♥ UNICEF's support and procurement of nutrition-related items, breastfeeding, nutrition training, nutrition plans, and healthy school initiative
- ♥ Technical support from INCAP for nutrition-related activities – Fruit Day and Wellness Week
- ♥ National Nutrition Training for School Teachers on nutrition, NCDs, and wellness (Continuous Professional Development)
- ♥ Organized stakeholder sessions for Nutrition in Emergencies (support for nutrition in emergencies and natural disasters)



Services:

- ♥ Nutrition Consultations (4105): NHR – 1159, WHR- 293, SHR- 1173, Toledo- 1480.
- ♥ 52 Wellness Sessions (weigh-in assessments): NRH- 19, WHR- 5, SRH- 9, Toledo- 2
- ♥ 32 Health Fairs: WHR- 2, NHR- 21, SHR- 9
- ♥ Provided 140 Nutrition talks
- ♥ 23 School Sessions for Toledo Cash Plus: WHR-11, NHR- 28, Toledo- 50, SHR- 51
- ♥ 38 Trainings and webinars: NHR – 16, SHR- 16, WHR – 4, Toledo -2
- ♥ 95 Mobile sessions with Maternal and Child Health: NHR- 77, Toledo- 3, SHR- 11
- ♥ 287 Home visits
- ♥ 72 Cooking Sessions: Toledo- 70 and Orange Walk- 2
- ♥ 18 Other Nutrition Outreach activities (cooking demonstrations, exercise sessions, challenges, walks): NHR – 5, SHR -10, Toledo – 3

2.15 Pharmacy Unit

Legislation and procedures:

- ♥ Reviewed the Food & Drug Regulation to include the importation process for Pharmaceuticals and Supplements.
- ♥ Initiated developing a Standard Operating Procedure for Sister Agencies through



consultation with the Customs & Excise Department including procedures for importing Controlled Drugs for Commercial and Personal Prescriptions, Precursor Chemicals & Supplements.

Stakeholders Engagement and Partnerships:



Environment, Ministry of Education, University of Belize, and Department of Agriculture.

- ♡ Obtained access to PAHO Strategic Fund Demand Consolidated Platform-ensures access to the procurement of safe & cost-effective medications.
- ♡ Completed ACSIS Tech to map the pharmaceutical profiles necessary for the CDEP project with PAHO's technical support.
- ♡ Completed and presented the AMR-NAP in consultation with PAHO and in collaboration with the AMR Committee -BAHA, Department of the

- ♡ Completed the International Narcotic Control Board (INCB) reporting mechanism for Psychotropics, Narcotics, and Precursor Chemicals, via the different forms- done quarterly and yearly- based on the country's usage for medicinal and scientific use.

Services:

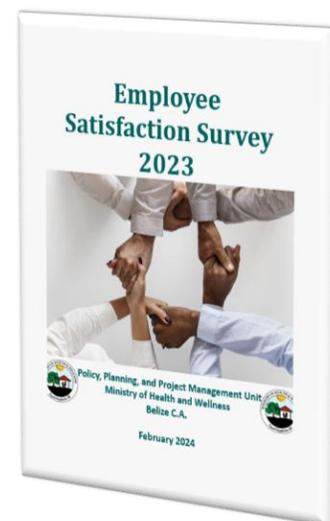
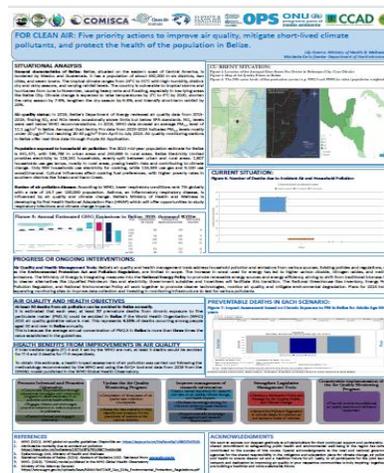
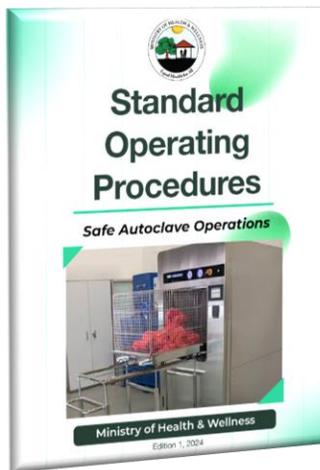
- ♡ 100% electronic approvals of imported pharmaceuticals completed.
- ♡ Maintained an Active Third-Party Selectivity Sister - Agency on Asycuda alongside the Belize Customs Department.
- ♡ Processed approvals for Pharmaceutical Importation for Licensed Importers.
- ♡ Registered 80% of all imported pharmaceuticals with the Ministry of Health & Wellness per the Food and Drug Amendment Act.
- ♡ Completed the first sitting of the pharmacy board licensure examination; 5 candidates successfully passed
- ♡ Completed the second sitting of the pharmacy board licensure examination; 9 candidates successfully passed.
- ♡ 100% of Precursor Chemical Importation by legitimate institutions approvals done in compliance with the PEN Online Program within the specified timeline for feedback.



Capacity Building:

- ♥ Participated in a workshop on The Federal Commission for Protection Against Sanitary Risks of the Republic of Mexico to develop a Regional School for Sanitary Regulations in Mesoamerica.
- ♥ UNFPA Workshop on Reproductive Health Commodities Security on forecasting, procurement, distribution, and storage of these commodities to ensure access and timely procurement.

2.16 Policy Analysis and Planning Unit



Governing documents:

- ♥ Completed the first draft of the National Triage Policy
- ♥ Initiated the updating of the Employee Orientation Manual
- ♥ Initiated the first draft of the HRH Policy and Strategic Plan
- ♥ Collaborated on the National Immunization Plan with MCH and UNICEF.
- ♥ Collaborated with external stakeholders on developing the Water Safety Plan Draft
- ♥ Supported the Global Fund's Grant Cycle 7 (GC7) HIV Funding Proposal, which aims to secure funding for HIV programs in Belize for the years 2025-2027, was successfully reviewed and accepted by the Technical Review Panel
- ♥ Reviewed and assisted in the development of the Community Health Worker Training Manual
- ♥ Collaborated with IADB in developing the first draft of the Belize Quality Policy for Health.
- ♥ Assisted in reviewing and revising the National Breastfeeding Policy
- ♥ Reviewed and revised the Multisectoral Response Protocols for Gender-Based Violence
- ♥ Completed the revision of the Draft Occupational Safety and Health (OSH) Bill
- ♥ Completed the MOHW Institution Review Board Terms of Reference Draft.
- ♥ Developed Standard Operating Procedures for Safe Autoclave Operations
- ♥ Analyzed and completed Employee Satisfaction Survey Report 2023
- ♥ Compiled and submitted the Annual Technical Report 2023
- ♥ Collaborated in the review and updating of the Food and Drug Regulations
- ♥ Collaborated with PAHO in the development of the HNAP

- ♡ Collaborated with DOE and SE-COMISCA on the development of an Air Quality poster for Belize
- ♡ Developed the Health Sector Reform Working Group Terms of Reference (ToR) and an evidence-based position paper supporting health systems strengthening and the integration of the public health system.
- ♡ Launched and implemented the Quality Assurance Manual in Diagnostic Imaging with the support of the IAEA
- ♡ Collaborated in the development of a Community Surveillance Manual for Malaria & Reporting of Fever Cases in collaboration with PAPU, HECOPAB, & Communications Unit
- ♡ Collaborated with RMEI-IDB and Vector Control Unit in developing Guidelines for Surveillance Committees' Situation Rooms.



Coordination and Collaboration:

- ♡ Coordinated and implemented the One Health Zoonotic Disease Prioritization Workshop.
- ♡ Updated and submitted the MOHW Program Budget 2025-2026, ensuring alignment with national health priorities.
- ♡ Completed the Auto Evaluation for the Disaster Risk Management Strategic Plan.
- ♡ Completed the PAHO questionnaire On Monitoring Health Emergencies and Disaster Risk Reduction for 2023.
- ♡ Collaborated with NDACC to develop a proposal for a youth school program
- ♡ Collaborated in planning the Gender-Based Violence Once Stop Shop with stakeholders such as SIF, the Police Department, the Women's Department, and the Magistrate Court.
- ♡ Collaborated with RET International and the Women's Commission to educate healthcare workers, Police Officers from the Domestic Violence Unit, and Social Workers on the management of gender-based violence in emergencies and Human Trafficking





♥ Participated in consultation sessions on national indicators for gender-based violence and violence against women and children

Capacity Building:

♥ Participated in various webinars on Monitoring and Evaluation, HIV/TB, Global Reporting, Climate Change, Nursing, Gun Violence,

Immunization, etc.

- ♥ Re-engaged key stakeholders to advance the implementation of the HEARTS Initiative, promoting cardiovascular disease prevention and control.
- ♥ Participated in “Gestión Integral de la Calidad del Aire y Salud en el Marco de la Acción Climática: Orientación para tomadores de decisiones en Centro América y República Dominicana - 1era Edición – 2024” with SE-COMISCA and PAHO.
- ♥ Execution of Onsite Quality Assessment and Control (QAC) for Human Resources Management (HRM)- ensures up-to-date and reliable data for decision-making processes regarding workforce distribution, training needs, and resource allocation.
- ♥ Data Analysis and Interpretation for the HRM Platform—to ensure all employee information was collected, interpreted, and summarized.
- ♥ Facilitation and Presentation at Workshops on Ethical Principles in Healthcare- to ensure a holistic and ethically sound approach to healthcare that respects the rights and dignity of all individuals for vulnerable populations, including those affected by HIV/AIDS.
- ♥ Technical Support for IBBS (Integrated Biological and Behavioural Surveillance)- a program aimed at monitoring and assessing the behaviours and biological outcomes of populations at risk for HIV in Belize; IBBS data will be crucial for guiding HIV interventions and allocating resources to areas with the highest need.
- ♥ Review and Validation of Global Health Estimates Data (GHED) for Belize (2000-2022)- contributed significantly to improving the quality of health data in Belize and informed future planning efforts.
- ♥ Technical Support on Long-Term Care (LTC) Policy- aims to improve the provision of care services for the elderly and other populations requiring long-term care.
- ♥ Development of TORs for Health System Strengthening Projects
- ♥ Participated in the National Implementation of the Quality Assurance Manual in Diagnostic Imaging Training





♡ Technical Review of Health Plans and Policies

International engagements:

♡ Belize Delegation Participation at Taipei, Taiwan's 2024 Global Health and Welfare Forum. Explored opportunities for technical collaboration to strengthen Belize's health system

♡ Belize Delegation Participation in Study Tour of Chile

for Health Systems Strengthening and Universal Health Coverage. Assessed Chile's integrated health system model, including digital health strategies, health financing mechanisms, and regulatory frameworks to support public health advancements in Belize.

- ♡ Participated in three regional workshops on Immunization and Racial Equality.
- ♡ Participated in a workshop on strengthening the capacities of air quality and health management
- ♡ Participate in the first meeting of the Joint Learning Network's Climate Smart Health Systems (CSHS) Collaborative
- ♡ Participated in Taiwan ICDF policies and promotion plan towards the prevention and control of chronic diseases
- ♡ Participated in the COMISCA Meeting and contributed to the validation of the Regional Digital Health Strategy 2025-2030, engaging in policy discussions on regional health integration and digital transformation.

2.17 Project Management Unit

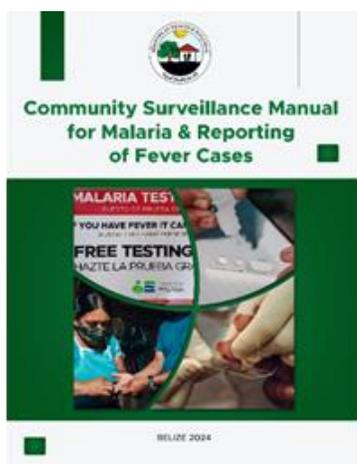
Regional Malaria Elimination Initiative (RMEI)

- ♡ Completed Training in Rapid Response Teams (RRT) for 152 health workers countrywide
- ♡ Contracts renewed for Vector Control Technician I and III, Microscopist, and Community Platform Agents (2)
- ♡ 26 Vector Control Technicians benefited from an entomology course in Mosquito biology, ecology, and surveillance, and an introduction to insecticide resistance testing.



- ♥ 66 Vector Control Technicians from Western Regional Hospital, Southern Regional Hospital, Northern Regional Hospital, and Central Region were trained in Safe Pesticides Management.
- ♥ Technical training was conducted for 22 Doctors and 16 Nurses on Training of Trainers (TOT) in Clinical management and vector-borne diseases.
- ♥ Training in Malaria Surveillance at the community level and validation of the CHW manual in Toledo, Independence, Dangriga, Belmopan, San Ignacio, Belize City, Orange Walk, and Corozal was conducted.
- ♥ Behavioral Change Communication (BCC) training was implemented with flipcharts for Community Platforms (60 personnel attended representing various communities).
- ♥ 7 microscopists attended the National Competency Assessment Microscopy Training.
- ♥ Local Level Microscopy Training was conducted- Corozal (9), Orange Walk (4), and Belize City (8).
- ♥ Rapid Response Team modules and case investigations training conducted- Belize District (31) including Vector Control and Public Health Officers, Medical Officers, Nurses, District Health Educators, laboratory and pharmacy technicians, administrative leaders, and Epidemiologists.

2.18 Vector Control Unit



Manuals and guidelines

- ♥ Completed a Community Surveillance Manual for Malaria & Reporting of Fever Cases in collaboration with PAPU, HECOPAB, & Communications Unit
- ♥ Drafted a bi-national agreement for malaria elimination with Guatemala – pending signing

Capacity Building:

- ♥ Training of trainers for 38 medical officers countrywide in clinical management of dengue, malaria, leishmaniasis, and Chagas disease.
- ♥ 140 doctors and nurses completed the PAHO dengue clinical management course
- ♥ Continuous strengthening of the diagnostic network: Five malaria microscopists were trained over 10 days in the first in-country national competence assessment for malaria microscopy, a WHO/PAHO competency-based certification at level II.
- ♥ Twenty (20) organized, trained, and fully functional community platforms. The number of Community Platforms fully established and functional is Toledo District (2), Stann Creek District (5), Cayo District (3), Orange Walk District (5), and Corozal District (5) in efforts to prevent the re-establishment of Malaria in Belize. The total Community Platform members now stand at one hundred thirty-eight.

- ♡ 33 voluntary collaborators, 156 community health workers, 48 vector control officers, and 10 district health educators re-trained in malaria surveillance and procedures for taking samples and performing rapid diagnostic tests.



Collaboration and partnerships:

- ♡ Secure additional financing for malaria through the IDB for USD 424,693.7
- ♡ Strengthen the vehicle fleet by procuring 2 pickup trucks through the RMEI project.
- ♡ Procurement of entomology equipment for district offices through the RMEI project.
- ♡ In collaboration with the EPI Unit, trained 125 health personnel involved in surveillance, rapid response, case investigation, and outbreak management.
- ♡ With the support of the Pesticides Control Board, trained 53 vector control technicians in the safe use and application of public health pesticides—officers issued applicator licenses.
- ♡ With the support of the Belize Vector and Ecology Center, trained 45 field officers in vector surveillance, basic entomology, and insecticide resistance monitoring.



- ♡ Through the support of the BHIS Unit, the development and printing of malaria micro area maps for district programs.

- ♡ Development of a dengue case management poster for health facilities

Services:

- ♡ Organize a committee for review of surveillance at

health facilities, and education and surveillance at points of entry – BHIS Unit, Communications, EPI, Public Health, and Vector Control

- ♡ Ongoing re-distribution of long-lasting insecticide-treated nets in Toledo – 930+ nets in Trio Village. Bed net distribution in San Vicente & Jalacte will take place in December – 600+ nets
- ♡ Supported the FETP cohort in course practicals through sponsorship and technical support in leishmaniasis.
- ♡ 8459 malaria rapid diagnostic tests done: Corozal (1063), Orange Walk (636), Belize (907), Cayo (2270), Stann Creek (2729), and Toledo (854).

- ♡ 18,251 malaria Thin-Blood Film (TBF) done countrywide: Corozal (1063), Orange Walk (636), Belize (907), Cayo (2270), Stann Creek (2729), Toledo (854), and Blood Bank (6660).
- ♡ 26,710 total malaria tests done: Corozal (1907), Orange Walk (2915), Belize (4133), Cayo (4223), Stann Creek (5407), Toledo (1465), and Blood Bank (6660).
- ♡ 2294 dengue tests done: 1207 cases in females and 1087 cases in males.

2024 Indoor Residual Spraying (average for 2 cycles)				
	# of communities sprayed	# houses sprayed by IRS	Population Protected by IRS	% coverage (houses)
Corozal	8	999	3081	56
Orange Walk	6	980	3386	72
Belize	0	0		0
Cayo	8	2052	7982	88
Stann Creek	9	1566	5558	90
Toledo	17	1264	5947	86
Total	48	6,861	25,954	

Table 2: Number of Indoor Residual Spraying in 2024

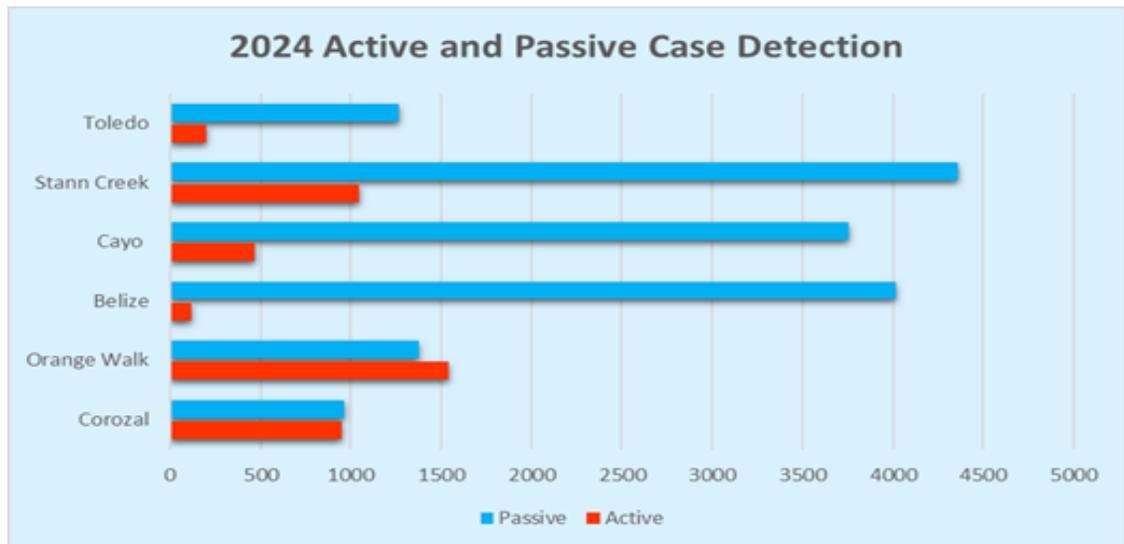


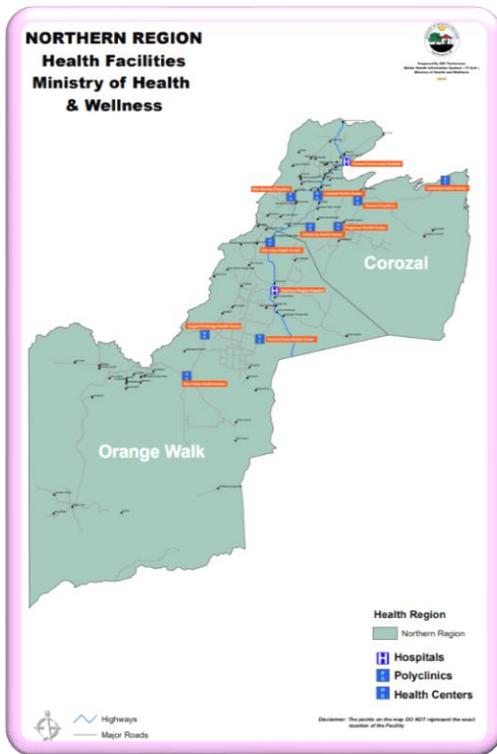
Figure 7: 2024 Active and Passive Case Detection for Malaria Surveillance

2.19 Northern Health Region

District	Population	Male	Female	Urban	Rural
Orange Walk Catchment Area	55,082	27,482	27,601	13,655	41,428
Corozal Catchment Area	52,661	26,231	26,429	14,011	38,650
Total	107,743				

Table 3: Northern Health Region Population Breakdown by Catchment Area

Source: Statistical Institute of Belize



♥ The crude death rate was 0.9 per 1,000 population

♥ The maternal mortality rate is 0 per 100,000 live births. This highlights effective initiatives such as the Quality Improvement via Meso-America and UNICEF.

♥ The under-5 mortality rate was 40 per 1,000 live births

♥ Causes of under 5 years' death consist of deaths due to respiratory illness, congenital malformation, bacterial sepsis, metabolic disorders, volume depletion, and bronchopneumonia.

♥ The infant mortality was at 16 x 1,000 live births

♥ In Orange Walk, 71 persons died because of malignant neoplasm, 70 due to diabetes mellitus, and 63 due to heart disease.

♥ In Corozal, 28 deaths are attributed to diabetes mellitus, with a slight decrease of 3 from last year. The second most common cause of death

continues to be malignant neoplasms, with 27 deaths. Third was hypertensive disease, with a total of 21 deaths. It is essential to highlight that mental disorders increased from zero deaths to six deaths, making it the tenth leading cause of death for 2024.

♥ Acute Respiratory Infections (ARI) were the leading communicable disease, followed by Acute Gastroenteritis and vaginitis.

♥ Tuberculosis -5 new patients; 35 patients diagnosed and on treatment; 5 completed treatment and met the criteria to be classified and followed up as cured.

♥ The northern health region HIV program has introduced PrEP for the key population, with a total of 12 people on PrEP. 67% of people on PrEP were from the Orange Walk District. This initiative requires further promotion to contain the spread of HIV among key populations.

Corozal Community Hospital: Hospital Production and Bed Utilization											
	No. of Beds	Bed Days	Admissions	Discharges Including Deaths	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
Years											
2020	32	10,438	1435	1453	38	3226	8.8	45.4	5.0	2.2	30.9%
2021	38	13,058	1284	1277	31	3114	8.5	33.6	7.8	2.4	23.8%
2022	40	14,600	1333	1337	45	3288	9.0	33.4	8.5	2.5	22.5%
2023	28	10,220	1256	1260	40	3353	9.2	45.0	5.5	2.7	32.8%
2024	27	9,882	1423	1423	40	3485	9.5	52.7	4.5	2.4	35.3%

Table 4: Corozal Community Hospital Production and Bed Utilization
Source: Data gathered from monthly census reports (admission and discharge book).

Northern Regional Hospital: Hospital Production and Bed Utilization											
	No. of Beds	Bed Days	Admissions	Discharges Including Deaths	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
Years											
2020	57	20,862	4468	4132	69	13573	37.1	72.5	1.8	3.3	65.1
2021	57	20,805	3878	3704	57	15,188	39	73	1.9	3.2	73
2022	59	21,535	4277	4215	56	15215	39.2	73.1	1.8	3.2	73
2023	59	21,535	3810	3818	104	15074	41.3	70	1.7	3.0	70
2024	58	21,228	4691	4324	90	12360	33.8	74.6	2.1	2.9	58.2

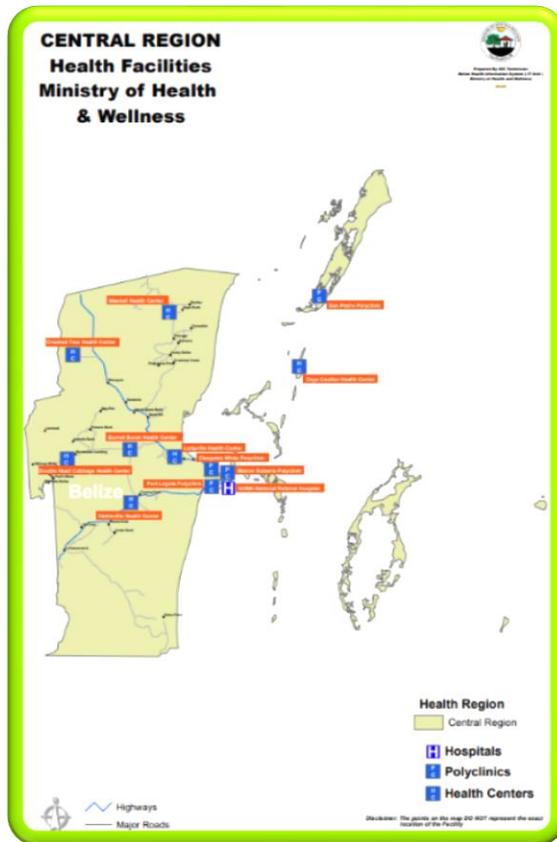
Table 5: Northern Regional Hospital Production and Bed Utilization
Source: Data gathered from monthly census reports (admission and discharge book).

2.20 Central Health Region

Community	Population	Female	Male	Sex Ratio	
				F	M
Belize City	66,083	34,175	31,908	107	93
San Pedro	22,755	10,952	11,803	93	108
Belize Rural	42,525	21,290	21,235	100	100
Total	131,363	66,417	64,946	102	98

Table 6: Central Health Region Population Breakdown by Catchment Area
Source: Statistical Institute of Belize

- ♥ The crude death rate was 5.2 per 1,000 population, a significant decrease of 1.2 compared to 6.4 per 1,000 population in 2023
- ♥ The maternal mortality rate increased to 2.3 per 1,000 live births in 2024 compared to 1.4 per 1,000 live births.
- ♥ The under-5 mortality rate was 19.1 per 1,000 live births, lower than in 2023, with 8 fewer deaths reflecting better pediatric health interventions.
- ♥ The highest percentage of deaths in children under five years of age occurred in early neonatal, followed by late neonatal deaths.



44% of deaths were related to Conditions arising during the perinatal period, indicating that more follow-up and control actions are required for pregnant women from primary care providers.

Causes of death have shown few variations, with perinatal conditions being the leading cause of death, followed by respiratory distress syndrome of the newborn, unspecified intraventricular hemorrhage (non-traumatic) of the fetus and the newborn, and intracerebral (non-traumatic) hemorrhage of the fetus and the newborn.

Non-communicable diseases dominate mortality: Diseases of the heart (18%), malignant neoplasms (14%), and diabetes mellitus (4%) collectively account for over one-third of deaths.

Injuries and violence are significant contributors: Assault (homicide) (10%) and unintentional injuries (9%) make up nearly one-fifth of all deaths.

Residual and respiratory-related

deaths remain prominent: "All other diseases" (26%) and communicable conditions like influenza and pneumonia (5%) continue to impact the population heavily.

- Deaths from cardiovascular diseases significantly declined; hypertensive heart disease remains steady as a cause of death but should not be overlooked as unmanaged hypertension is a significant risk factor; hypertension accounted for 49% of diagnosed NCD cases in 2024, compared to 41% in 2023
- The total deaths from communicable, maternal, perinatal, and nutritional conditions decreased significantly from 150 in 2023 to 55 in 2024. Significant reductions were observed in infectious and parasitic diseases, particularly deaths from HIV/AIDS, which reduced from 49 in 2023 to 10 in 2024.
- Deaths from malignant neoplasms decreased significantly in 2024, with notable decreases in breast cancer (10 to 3), prostate cancer (12 to 7), and other malignant neoplasms (14 to 5).
- Prostate cancer (7 deaths) remains the leading cause, followed by colon and rectum cancers, trachea and lung cancers, and cervical cancer, each with 5 deaths.
- Oncological care increased from 8.7% to 11.3% of encounters in the central region, with breast cancer being the most commonly diagnosed, a situation that has been repeated in the last 5 years and the diagnosis and care of patients with prostate cancer has increased this year.
- Acute respiratory infections and gastroenteritis continue to predominate as the most frequent communicable conditions

- ♥ Diagnosis of unspecified STIs increased from 74 in 2023 to 119 in 2024.
- ♥ Gastroenteritis cases remained high, especially among older populations (>5 years), with 2,456 cases in 2024.
- ♥ Acute Respiratory Infections >5 years showed a sharp rise in 2024, with 10,498 cases compared to 9,202 in 2023.
- ♥ Confirmed dengue cases dropped from 68 in 2023 to 55 in 2024, while probable cases decreased from 123 to 35.

Productivity Report for Central Health Region		
	Key Outcome / Impact Indicator	Outcome Result Expression
Primary Care	Total Consultations	156187
	Mobile Clinics conducted	95 %
	Reduction of Maternal Mortality	2 Cases (Late Maternal)
	Elimination of mother-to-child transmission (EMTCT)	1 transmission rate
	Increase in first-trimester Booking	Coverage of 60.3%
	Availability of Core drugs	92 %
	X-ray index	1.11
	85 % Vaccination coverage in immune-preventable	BCG - 77.4 % 3 rd DPT/ OPV - 85.44% MMR 1 - 95.78% MMR 2 - 80.5 % ANC - DT - 86%
	PMTCT	100% received prophylactic treatment
	Percentage of medication dispensed	90 % achieved
	Malaria Slide Positivity Rate	0
	Home Visit Conducted by Community Health Worker	4445
	Increase in the number of joint projects or activities (HECOPAB)	1558
	Consultations	156,171

Table 7: Productivity Report for Central Health Region

Source: BHIS data

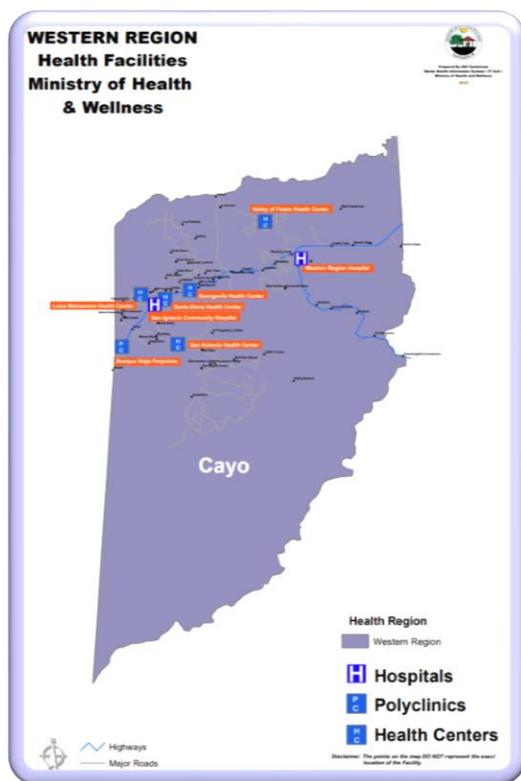
2.21 Western Health Region

District	Population	Male	Female	Urban	Rural
Belmopan Catchment Area	35, 404	17, 210	21, 789	12, 725	22, 679
San Ignacio Catchment Area	68, 009	33, 269	34, 740	23, 578	35, 367
Total	103, 413				

Table 8: Western Health Region Population Breakdown by Catchment Area

Source: Statistical Institute of Belize

- ♥ The crude death rate was 4.06 per 1,000 population, a slight decrease of 0.15 compared to 4.21 per 1,000 population in 2023.



♡ The maternal mortality rate is 0 per 100,000 live births.

♡ The under-5 mortality rate was 25 per 1,000 live births, an increase of 60 % compared to 2023.

♡ The causes of death for Under-5 were respiratory distress syndrome of the neonate followed by congenital malformations and neonatal aspiration of meconium (unspecified with 3 cases) respectively.

♡ The infant mortality was at 20 x 1,000 live births, with most infant deaths occurring in the neonatal period (6 deaths are being investigated- 3 are unidentified persons whose pathology reports are pending).

♡ The total number of deaths recorded was 420 with the three most frequent causes of death being non-communicable diseases (72%), Injuries (17%), and Communicable Diseases (10%).

♡ Cardiovascular diseases, Malignant Neoplasm, Digestive diseases, and Diabetes

Mellitus II are the main causes of death among non-communicable diseases. Infectious & Parasitic diseases are the main cause of communicable diseases. Unintentional injuries due to a High index of RTA are the main cause of death from injuries.

- ♡ Pneumonia (30%) and HIV (20%) diseases resulting in multiple infections, but not having progressed to AIDS, were responsible for most of the cases of death due to communicable diseases. Pneumonia was the leading cause of death due to communicable diseases.
- ♡ Tuberculosis -17 patients diagnosed and initiated treatment; 5 completed treatment and met the criteria to be classified and followed up as cured; 1 death attributable to TB in 2024.
- ♡ The reasons for hospitalization have remained consistent throughout the five years, with pregnancy, childbirth, and the puerperium constituting the top causes of hospitalization.
- ♡ Causes of hospitalization are reflected in the bed occupancy per ward, with the maternity and internal medicine wards exceeding 100% capacity in 2024.

Productivity Indicators											
Name of Facility	Year	# of Beds	Admissions	Discharges (including deaths)	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
WRH	2020	63	4217	4166	0	10869	29.80	66.10	2.90	2.60	47%
WRH	2021	63	3987	4067	98	10061	27.56	64.56	3.18	2.47	44%
WRH	2022	61	6647	6204	57	9888	27.10	101.70	1.20	1.60	56%
WRH	2023	64	4242	4230	75	12342	33.81	66.09	1.22	2.92	70%
WRH	2024	45	4289	4162	99	12975	35.45	92.49	0.84	3.12	79%

Table 9: Western Regional Hospital Production and Bed Utilization

Source: BHIS Data

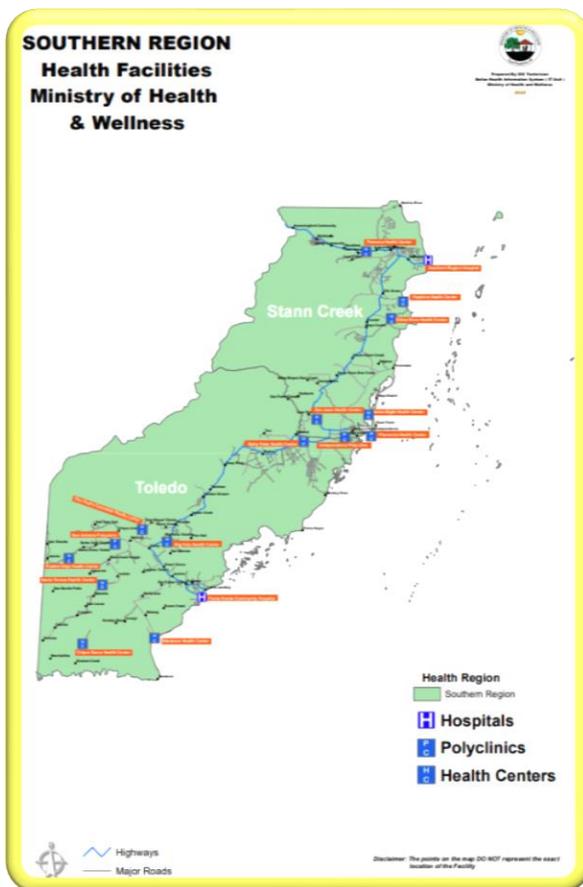
Productivity Indicators											
Name of Facility	Year	# of Beds	Admissions	Discharges (including deaths)	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
SIH	2020	23	1954	1963	4	2956	8.10	85.30	2.80	1.50	35%
SIH	2021	23	1760	1759	4	2782	7.60	76.50	3.20	1.60	33%
SIH	2022	23	2387	2357	22	3490	9.60	68.90	3.80	1.50	42%
SIH	2023	23	2286	2280	13	3824	10.50	99.10	1.00	1.70	62%
SIH	2024	17	2376	2353	12	4214	11.50	138.40	0.90	1.80	68%

Table 10: San Ignacio Community Hospital Productivity and Bed Utilization
Source: BHIS Data

2.22 Southern Health Region

District	Population	Male	Female	Urban	Rural
Stann Creek	48,162	23,232	23,110	9,927	36,415
Toledo	38,259	19,247	19,697	5,406	33,538
Total	85,286	18,815	19,444	5,453	32,806

Table 11: Southern Health Region Population Breakdown by Catchment Area
Source: Statistical Institute of Belize



♡ The crude death rate for Toledo was 4.0 per 1,000 population, a slight increase of 0.1 in 2023.

♡ The crude death rate for Stann Creek was 4.4 per 1,000 population, a slight increase of 0.1 in 2023.

♡ In the SHR, more than 80% of under-five deaths were in rural communities. Past research has shown challenges in accessing health care services through the Polyclinics or satellite clinics.

♡ 21 cases were reported for under 5 deaths due to Respiratory Distress, Bronchitis, and pneumonitis due to chemicals, gases, fumes and vapors, Neonatal Cardiac Failure, Cancer, Birth asphyxia, Cerebral Palsy, Bronchopulmonary Neonatal aspiration of meconium, and multiple congenital malformations.

♡ The maternal mortality rate is 0 per 100,000 live births for Toledo but 98.2 for Stann Creek.

♡ Infant mortality rate was 3.4 per 1000 live births for Toledo and 2.9 for Stann Creek.

♡ Neonatal mortality rate for Toledo was 8.6 compared to 8.8 for Stann Creek per 1000 live births.

- ♥ Non-communicable diseases dominate mortality: malignant neoplasms (17.6%), diseases of the heart (15.7%), and diabetes (14.4%) for the Stann Creek district.
- ♥ Non-communicable diseases dominate mortality: diabetes (21.2%), malignant neoplasms (18.8%), essential hypertension and heart disease (16.5%), and for the Toledo district. Notably, Road Traffic Accidents ranked the fourth leading cause of death.
- ♥ Top 5 communicable diseases include acute respiratory infections, gastrointestinal infections, conjunctivitis, scabies, and all vaginitis infections.
- ♥ Tuberculosis- 232 patients in 2024, which marks the highest number of clients in history, with 2 new patients; 4 deaths, 0 relapse, 8 completed treatment; and met the criteria to be classified and followed up as cured.

Productivity Indicators - Punta Gorda Hospital 2020-2024										
Year	# of Beds	Admissions	Discharges (including deaths)	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
2020	28	1465	1470	10	2794	7.7	52.5	5.1	2.0	25.7
2021	28	1225	1209	9	2285	6.3	43.2	6.3	1.9	23.2
2022	28	1519	1526	16	3340	9.2	54.5	0.7	2.2	32.7
2023	32	1640	1638	20	3973	10.9	51.2	4.7	2.4	34.0
2024	32	1590	1583	12	3674	10.1	49.5	5.1	2.3	31.5

Table 12: Punta Gorda Hospital Production and Bed Utilization

Source: BHIS data

Productivity Indicators - Southern Regional Hospital										
Year	# of Beds	Admissions	Discharges (including deaths)	Deaths	Patient Days	Average Daily Census	Bed Turnover Rate	Bed Turnover Interval	Average Length of Stay	Bed Occupancy Rate
2020	67	4166	4308	23	21776	59.5	64.3	0.6	5.1	88.8
2021	81	4329	4329	21	18864	51.7	53.4	2.1	4.4	67.1
2022	81	4969	4860	56	20269	55.5	72.5	1.5	4.2	73.1
2023	61	4772	4647	33	19375	53.1	76.2	0.6	4.2	87.0
2024	61	4337	4209	48	17810	48.8	60.0	1.1	4.2	80.0

Table 13: Southern Regional Hospital Production and Bed Utilization

Source: BHIS data

Human Resources

1. CAPACITY BUILDING

Investing in training personnel in specialized areas is critical to promote productivity, strengthen health outcomes, and prioritizing patient safety.





2. RESOURCE ALLOCATION

Availability of resources (transportation, financial, etc.) enhances the success of all programs and motivates staff.





3. TIMELY PROCESSES

Timely recruitment process, promotions, and benefits boost staff morale





4. RECRUITMENT OF STAFF

Availability of competent and skilled health care workforce reduces disparities and improves accessibility.



5. COMPENSATION

Availability of incentive package for the different categories of staff addresses brain drain and ensures staff retention.






6. COORDINATION

Timely coordination and communication is critical for successful programs and projects.



Administrative

1. PLANNING

Timely succession planning is pivotal to enhance stability and resilience and promote strong organizational culture while mitigating financial risks.



2. ADEQUATE RESOURCES

Continuous availability of quality pharmaceuticals and medical supplies, adequate finance & human resources to enhance service delivery.

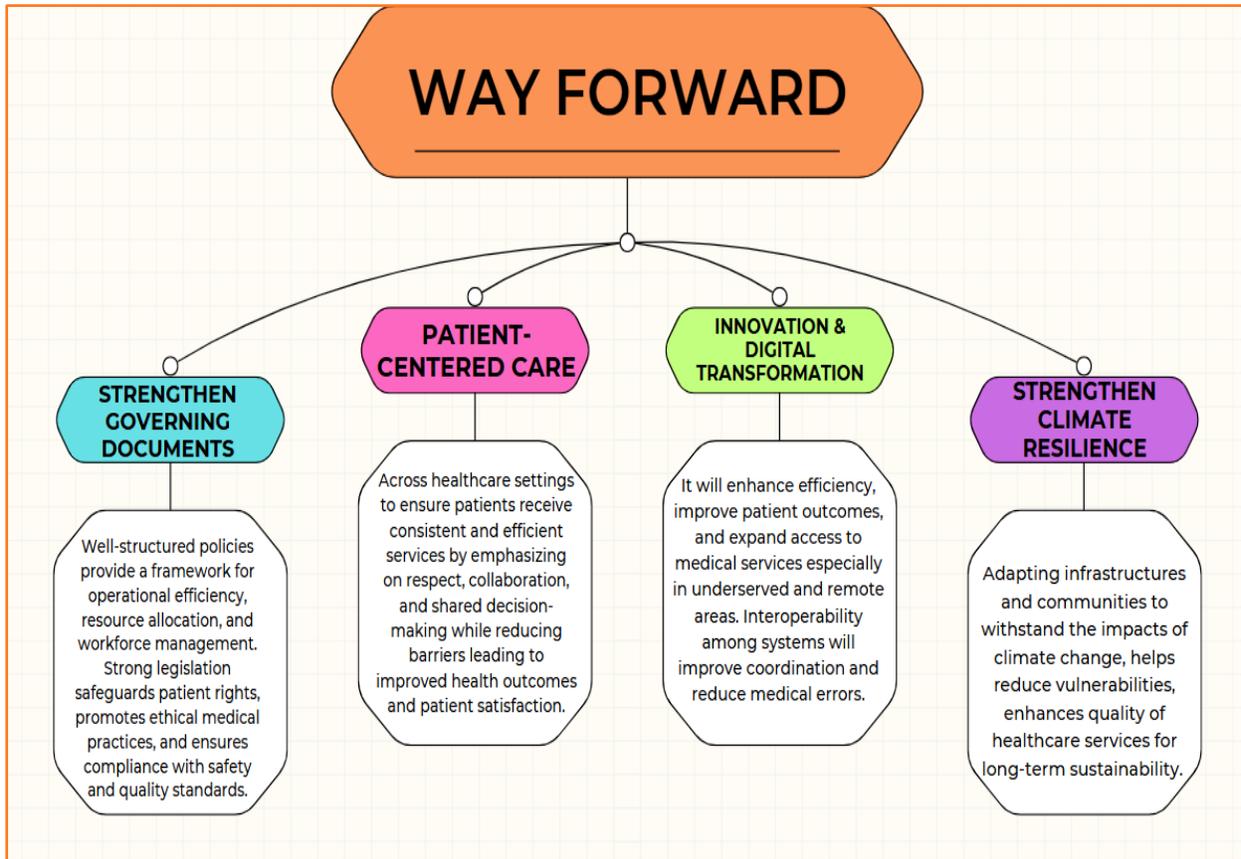
3. OPERATIONAL DOCUMENTS

Timely updating of key documents improves operational efficiencies, builds public trust and emphasizes commitment to high quality care.



4. INFRASTRUCTURE

Upgrading infrastructure contributes to environmental sustainability, strengthens system resilience, and promotes improved work environment for patients and staff.



Staffing

Approximately 2,000 public officers are employed in the MOHW, of which approximately 976 are considered technical staff (i.e., doctors, nurses, and dentists). Human resources are the backbone of any functional health system. From specialists to administrative and support staff, they all play a crucial role in delivering health services. Hence, to achieve Universal Health Coverage and Sustainable Development Goals, it is imperative to strengthen health systems with a well-trained, adequately distributed, and motivated workforce to deliver high-quality health care and improve public health outcomes.

Belize's Ministry of Health and Wellness is developing governing documents that will help address these challenges and create a roadmap. As a means of strengthening the health system, the developing process of a Human Resource for Universal Health Policy 2025-2029 has initiated and will testify to the ministry's commitment to ensuring adequate distribution of healthcare workers throughout the public health system and in safeguarding public health outcomes by enhancing accessibility, efficiency, sustainability, and high-quality healthcare for all.

Parallel is the development of a new Human Resources for Universal Health Strategic Plan 2025-2029, a roadmap for action, grounded in data and informed by best practices, providing a clear framework for achieving equitable access to quality healthcare. This plan will complement the previous strategic plan and is expected to support the availability, accessibility, and quality of healthcare workers. Building competent and motivated staff aligns with national health priorities to contribute to better health outcomes and system sustainability.

An effective health workforce should consist of sufficient, well-trained, motivated, equitably distributed, and efficiently managed health professionals to meet the population's health needs. Investing in Human Resources for Health helps strengthen health systems, improve population health, achieve development goals, and ensure resilience against future challenges. Undoubtedly, investments in human resources improve retention, provide incentives, and reduce dependence on foreign health personnel. By addressing this, Belize will have a healthier population, leading to increased productivity, minimized brain drain, and lower healthcare costs.



Health Financing

The Ministry of Health and Wellness's (MOHW) annual budget slightly increased compared to the usual cap of around \$140,000,000. In light of the lessons learned from the COVID-19 pandemic, it has become essential to establish a public health emergency fund that can be readily accessed during times of urgent need. This is particularly important given the emergence of new diseases and the ongoing challenges posed by climate change. It is important to note that a significant portion of government expenditure is allocated to employment remuneration, followed closely by hospital services. Therefore, as we strive to achieve Universal Health Coverage, it is essential to explore and implement new, more effective investment strategies in primary healthcare to tackle the concerning rise in non-communicable diseases.

Cost Center	Description	Recurrent Expenditure
19017	General Administration	\$41,348,808
19021	Director of Health Services	\$2,005,133
19031	Belize District Health Services	\$6,948,684
19041	Epidemiology Surveillance	\$436,733
19068	Drug Inspectorate Unit	\$306,643
19074	Cayo District Health Service	\$6,695,287
19083	Orange Walk District Health Service	\$10,628,981
19092	Corozal District Health Service	\$6,630,380
19105	Stann Creek District Health Service	\$9,181,027
19116	Toledo District Health Service	\$4,730,199
19121	Medical Supplies	\$37,860,059
19131	Medical Laboratory Services	\$1,575,276
19141	National Engineering & Maintenance Center	\$764,125
19151	Planning and Policy Unit	\$541,667
19168	Belmopan Hospital	\$10,879,586
19178	HIV/AIDS	\$529,120
19188	Maternal & Child Health	\$2,787,824
19198	Environmental Health	\$384,202
19208	Regulatory Unit	\$203,422
19218	Belize Health Information System	\$357,655
19228	Vector Control	\$631,631
19238	Mental Health	\$326,540
19248	Health Promotion (HECOPAB)	\$165,608
19258	Palm View Mental Health	\$1,171,991
19268	Nutrition	\$107,541
19278	Dental	\$139,781
19288	Pharmacy	\$75,680
19291	San Pedro Health Services	\$1,963,788

19298	Project Management Unit (PMU)	\$458,154
30241	Nat Drug Abuse Control Council	\$954,333
TOTAL:		\$150,789,857

Table 14: Recurrent Expenditure by Cost Center

CONCLUSION AND RECOMMENDATIONS 6

The Ministry of Health and Wellness has significantly improved the population's health outcomes over the past year. Through the implementation of targeted policies, expanding healthcare services, and conducting effective public health interventions, notable progress has been achieved in areas such as disease prevention, health promotion, and service delivery. Nonetheless, challenges remain, particularly in ensuring equitable access to care, strengthening health systems, and addressing emerging public health threats.

The path to achieving Universal Health Coverage, aligned with the #planBelize Medium Term Development Strategy, the Sustainable Development Goals (SDGs) for 2030, and Horizon 2030, is manifested in different accomplishments. The reduction in out-of-pocket expenses, the removal of fees at all public facilities, and the ongoing expansion of the National Health Insurance (NHI) program into the Western region demonstrate the Ministry of Health and Wellness's commitment. This effort already ensures citizens in the Northern, Central, and Southern Health Regions have equitable and accessible health services.

Data collected and analyzed over the past year highlight the need for ongoing investment in infrastructure, workforce development, and digital health to increase efficiency, improve access, and reduce system burdens. Collaboration across sectors and with international partners has also proven essential to achieving public health goals and building resilience against future health crises.

The Ministry of Health and Wellness should continue strengthening its primary care by delivering patient-centered care, early disease detection, and comprehensive management of chronic conditions, such as NCDs, at the community level. Investing in digital infrastructure and data governance will improve the collection, storage, analysis, and sharing of health data by supporting strategic plans, resource allocation, and monitoring of national health indicators.

Completing and implementing policies, legislations, and strategic plans will lay a strong foundation, especially concerning human resources for health, which will support training programs, scholarship opportunities, competitive compensation packages, and professional development pathways. Additionally, empowering individuals, communities, and families by expanding public education initiatives to increase awareness of non-communicable diseases, mental health, nutrition, and healthy lifestyles is imperative.

The COVID-19 pandemic is a unique example of how lessons learned should enhance national capacity to respond to public health emergencies, including pandemics, natural disasters, and disease outbreaks, simultaneously with timely updating of protocols and plans while fostering intersectoral collaboration.

ANNEX 1: List of Operational Documents

Award

- ♥ Third place: Expanded Program on Immunization (EPI) surveillance indicators among English-speaking Caribbean countries.

Legislation

- ♥ Mental Health Act (*initiated review*)
- ♥ Food and Drug Regulations (*review in progress*)
- ♥ National Tobacco Bill (*submitted to Cabinet*)
- ♥ Occupational Safety and Health (OSH) Bill (*revision completed*)

Policy

- ♥ Launched Breastfeeding Policy (2024-2034)
- ♥ National Triage Policy (*pending approval*)



Standard Operating Procedures Developed

- ♥ Community Pharmacy Inspection Guidelines (*pending approval*)
- ♥ Evaluation and Registration of Pharmaceutical Products in Belize (*pending approval*)
- ♥ Licensing of Pharmaceutical Facilities (*pending approval*)
- ♥ HIV Qualitative Dried Blood Spot (DBS)
- ♥ Arbovirus
- ♥ Safe Autoclave Operations
- ♥ Sister Agencies for importing Controlled Drugs for Commercial and Personal Prescriptions, Precursor Chemicals & Supplements (*in progress*)



Manuals and Guidelines

- ♥ Community Health Worker's Manual and Job Aid Tool for CHWs
- ♥ Training Manuals: Blood Bank, Serology, Molecular biology (PCR), Hematology, Chemistry, Microbiology, Pathology
- ♥ Interim Surveillance Guideline: Monkeypox
- ♥ Community Surveillance Manual for Malaria & Reporting of Fever Cases
- ♥ Communicable Disease Surveillance Manual (*updated*)
- ♥ National Blood Bank Quality Policy (*revised- pending approval*)
- ♥ Algorithms and guidelines to detect arboviral diseases (*reviewed*)
- ♥ Funeral home standards for licensing
- ♥ Telemedicine guidelines for licensing
- ♥ National Medical Mission Guidelines 2024
- ♥ Launched the Updated Infant and Young Child Feeding Manual
- ♥ Employee Orientation Manual (*updating in progress*)



Protocols

- ♥ Viral Respiratory Disease Surveillance Protocol
- ♥ Multisectoral Response Protocols for Gender-Based Violence (*revised and reviewed*)



Plans

- ♥ Launched Belize National Suicide Prevention Plan (2024 – 2030)
- ♥ Antimicrobial Resistance (AMR) National Action Plan for Belize
- ♥ Launched the National Tobacco Control Action Plan
- ♥ Health National Adaptation Plan (H-NAP) (*pending launch and implementation*)
- ♥ Human Resources for Universal Health Policy and Strategic Plan (*initiated draft*)
- ♥ National Immunization Plan with MCH and UNICEF.
- ♥ Water Safety Plan (*draft developed*)



Reports

- ♥ Employee Satisfaction Survey Report 2023
- ♥ Annual Technical Report 2023



Proposals

- ♥ Develop a proposal and draft cabinet paper for nurses' retention and allowance package
- ♥ Global Fund's Grant Cycle 7 (GC7) HIV Funding Proposal



Publications

- ♥ One Health Investigation conducted: “One Health Investigation of Leishmaniasis, Arenal Village and Surrounding Areas, September 2024, Cayo District, Belize.” One Health FETP field investigation led to the 4th report of animal Leishmaniosis in Belize to the World Organization of Animal Health (WOAH).
- ♥ Advancing Air Quality, Climate, and Health objectives in Central America and Dominican Republic
<https://www.cleanairinstitute.org/post/advancing-aq-climate-and-health-objectives-in-central-america>
- ♥ Manuscript Published in American Journal of Field Epidemiology (Prevalence and Cluster Analysis of SARS-CoV-2 Variants of Concern, Belize, August 2021-July 2022, (Aldo Ivan Sosa, main author) DOI: <https://doi.org/10.59273/ajfe.v2i1.8413>

ANNEX 2: MOHW's Organogram

