

XI CONFERENCE OF DEFENSE MINISTERS OF THE AMERICAS

THEMATIC AXIS II:

Cooperation at the Military Health Level

Moderator: EE.UU Lieutenant Colonel Stephen Grenier

Rapporteur: Canada Rear Admiral Gilles Couturier

Co-Rapporteur: Colombia Mr. Juan G. Castro

Co-Rapporteur: Trinidad and Tobago Flight Lieutenant Marvin Bocus

The Working Committee met to review issues related to Cooperation at the Military Health Level, from the document presented by Canada. In this regard, speakers stated the following:

The representative of CANADA presented a military health system in his country and the way it is projected in cooperation for the hemisphere as it has been done in the regions of AFGANISTAN and the coasts of HAWAI, expressing the will of his country to formalize and conduct combined exercises on military health.

The representative of TRINIDAD AND TOBAGO presented that the treatment for a military patient in his country is conducted at the primary level in facilities called Medical Infirmary rooms; however, in case a patient needed attention of greater complexity, this personnel will be transferred to public hospitals since there are no military hospitals. Similarly, he stated that in his country, they train pharmaceutical personnel.

The representative of COLOMBIA presented that military health in his country provides comprehensive medical attention to all military personnel and their beneficiaries, it is provided in two fields. In the medical assistance field with medical treatment and Surgery in military hospitals and the operational field with specialized military health in campaign in three axes (Preoperational, in operations and rehabilitation).

The following representatives took the floor:

MEXICO informed they have a Health Military Medical Center, which hosts interns from other countries, training doctors, dentists and military nurses; it provides training in these professions for member countries.

PARAGUAY has military hospitals, with the current creation of the Defense University.

BELIZE requested to establish a network of experts to strengthen smaller States in order to boost their medical military capacity.

PERU proposed establishing regional networks and training to address pandemic diseases and natural disasters, requesting the exchange of military health internships among country members.

The representative of Canada made a summary of the three discussed topics:

- (1) Establishment of points of contact responsible for military health in the hemisphere.
- (2) Conductions of combined exercises on military health.
- (3) Building of capacities of the partners.

DOMINICA stated they have no military personnel; however, they do have paramilitary personnel.

BARBADOS expressed that not only will we have to share lessons learned, but also we should discuss military health techniques, tactics and procedures.

CONCLUSION

After long analysis and voting by attending delegations, they reached to the following conclusion:

Their agreement to prepare a list of points of contacts of responsible personnel for military health in the hemisphere and their commitment to assist with the creation of such a tool aimed at building a community of experts in military health to identify ways to improve military health capacities in the region and to facilitate the exchange of lessons learned among our countries.

RECOMMENDATION:

To add a paragraph to the Declaration of AREQUIPA in relation to Thematic Axis II “Cooperation at the Military Health Level”, Their agreement to prepare a list of points

of contact responsible for military health at the hemisphere and their commitment to assist in the creation of such tool aimed at building a community of experts to identify ways to improve military health capacities in the region and to facilitate the exchange of lessons learned among our countries.

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