Guatemala

Country Focus Areas

- Improve efficiency by providing technical assistance on strategic planning and public financial management, integrated service delivery networks, and data and evidence-based policy making.
- Free up domestic resources from debt payments through the GFF buy-down. A conditionality to receive the buy-down is for the Ministry of Finance to secure and guarantee double the amount of the buy-down (US$118 million), for the national conditional cash transfer program that has suffered from budgetary shortfalls in the past.
- Reduce stunting and chronic malnutrition through multisectoral approaches, focusing on increasing the quality of and demand for health and nutrition services, social safety nets, and sanitation.

RMNCAH-N Core Indicators

Maternal mortality ratio: 140 per 100,000 live births
Neonatal mortality ratio: 17 per 1,000 live births
Under-five mortality ratio: 35 per 1,000 live births
Adolescent birth rate: 93 per 1,000 women
Percent of births <24 months after the preceding birth: 18.8%
Stunting among children under 5 years of age: 47%
Moderate to severe wasting among children under 5 years of age: 1%

Health Financing Core Indicators

Health expenditure per capita financed from domestic sources: US$198 (2015)
Ratio of government health expenditure to total government expenditure: 17.94%
Percent of current health expenditures on primary/outpatient health care: 65.32%
Incidence of catastrophic and impoverishing health expenditures: 1.36% catastrophic, 0.29% impoverishing

Resource Mapping

Although resource mapping has not yet been undertaken in Guatemala, public expenditure reviews (PERs), health sector assessments and expenditure tracking using National Health Accounts (NHAs) have been completed in 2012, 2015, and 2017. Guatemala is not dependent on external financing, with less than 2 percent of total financing for the health sector from external sources.

Guatemala is on-track to implement efforts to improve efficiencies and public financial management systems, which is the main goal of conducting resource mapping. The GFF is supporting efforts to improve the planning, financial flow, and utilization of resources from the central Ministry of Health to departments within the ministry through improved alignment of annual purchasing and operating plans.

Monitoring the Country-Led Process

Investment Case in Development
Investment Case complete
Investment Case being implemented

Set of evidence based priorities financed
Not prioritized within available funding
Priorities determined, but financial gap remains
Priorities likely funded

Results monitoring strategy and framework in support of IC*
Not developed
Developed and initial assessment of results monitoring capacity available
Country platform (e.g., national level) with case results framework to review progress on a regular basis

Country-led multi-stakeholder platform (e.g., new or established from an existing platform)
Not yet established
Established and initial meeting held
Country platform holds regular country meetings to discuss results arising from implementing the IC and corrective action

Government focal point
Not yet identified
Established and initial meeting held
Country platform holds regular country meetings to discuss results arising from implementing the IC and corrective action

An inclusive country platform process with CSO engagement
Government focal point identified
Government focal point identified with contact available (e.g., GFF website)

Health financing reforms identified
Not considered at this time
Developed but not integrated in IC
Health financing in progress

World Bank-funded project in support of the IC
Project under preparation
Project approved and available online
Project disbanding

Private sector engagement
Private sector engagement not identified at this time
Country has either included or identified a private sector intervention
Country has started implementing a private sector intervention

Civil registration and vital statistics (CRVS) made a priority
CRVS not included in the process
CRVS representative identified
Civil society representative of national country platform meeting to discuss IC implementation and results

Management of medicines and supplies / supply chain interventions
Supply chain / commodity management not identified as a priority
Supply chain / commodity management identified as a priority
Supply chain / commodity management identified as a priority

SCORES

* Both included in the IC document or a separate document
** Meaning that funding was allocated, disbursed and released – payment done
*** ANC4 = four antenatal care visits
**** ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria, Tetanus, and Pertussis; QM = quality management; PPHN = prevention of maternal deaths; PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.

70 2018-19 ANNUAL REPORT

71