Guinea

Country Focus Areas

- Align the government’s strategy on RMNCAH-N with a newly elaborated investment case.
- Support the Rural Pipeline Strategy and the Community Health Strategy, which brings health personnel to rural health centers.
- Support the integration of birth and death notification and recording of causes of death into the District Health Information System 2 (DHIS2), improve the quality and security of forms and registers, and build capacity in civil registration.

RMNCAH-N Core Indicators

Maternal mortality ratio: 550 per 100,000 live births
Neonatal mortality ratio: 32 per 1,000 live births
Under-five mortality ratio: 120 per 1,000 women
Adolescent birth rate: 120 per 1,000 women
Percent of births <24 months after the preceding birth: 10%
Stunting among children under 5 years of age: 16%
Moderate to severe wasting among children under 5 years of age: 9.2%

Health Financing Core Indicators

Health expenditure per capita financed from domestic sources: US$4.61
Ratio of government health expenditure to total government expenditures: 4.11%
Percent of current health expenditures on primary/outpatient health care: 78.12%
Incidence of catastrophic and impoverishing health expenditures: 6.97% catastrophic; 2.48% impoverishing

The resource mapping, you shown here is for FY 2018. There are currently over 20 donors aligned with and committed to the investment case in Guinea. While there remains a financing gap of over 35%, Guinea has made a strong commitment to reducing maternal mortality by 15% and newborn and infant mortality by 20% over the next 5 years. While these are ambitious targets, the government is committed to the investment case and needs support for the IC and improvements in allocative efficiencies.

Monitoring the Country-Led Process