

# Primary Health Care in Guatemala

Notes and contributions from an urban perspective

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Guatemala

# Guatemala

- 18 million inh.
- 50% lives in poverty
- 25% lives in the metropolitan area
- Rapid urbanization, by 2030 Guatemala would be urban
- One of 20 countries in the world with highest inequalities



# Guatemala's national health system

2.3%

General Government Health  
Expenditure / GDP

Source: WHO. 2014

52%

Out-of-pocket expenditure  
/ THE

Source: WHO. 2014

49.6%

of population covered by MoH

Source: MoH ,2012

15.7%

Social insurance coverage

Source: MoH. 2012

Unregulated  
private-for-profit sector

Source: Flores, 2008

Fragmented

# Understanding of Primary Health Care

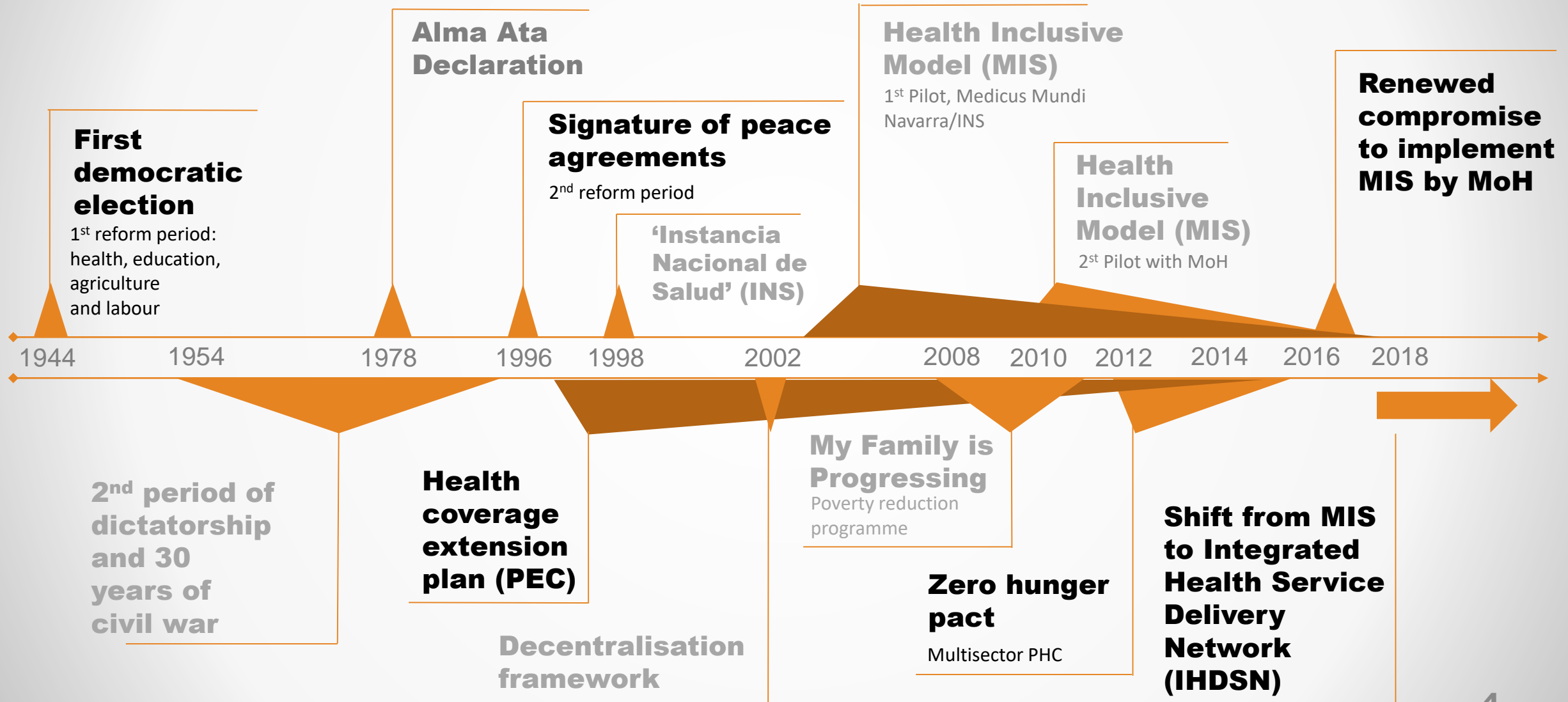
- **Policy-makers:** silver bullet to improve access and hospital care
- **Health professionals:** biomedical focus & targeting populations through first line services
- **Patients:** hospital preference, lack of services and medicine.
- **General public:** relates health to health determinants and illness to health care
- **Private-for-profit:** shaping perception of hospital and biomedical care

**Primary Health care needs to improve,  
but hospitals makes the headlines**

*“...service logic is not universalistic but targeting the poor. Not all the poor however, only the extreme poor. Not even all the extreme poor, only in selected communities. And not these communities as a whole, only their women and children. But not all women, only those in reproductive age. This ends up being a targeting of targeting of targeting. It is all the more exclusionary because the services offered don't even cover the needs of all under-5's and women in reproductive age. These are no more than the famous 'cost-effective interventions' that we know since the days of Primary Health Care: a basic package for child survival that has been repackaged (...) in Guatemala over the last 35 years”*

respondent from academia, 2016

# Official place of PHC in Guatemala





# What about Primary Health Care in Villa Nueva?

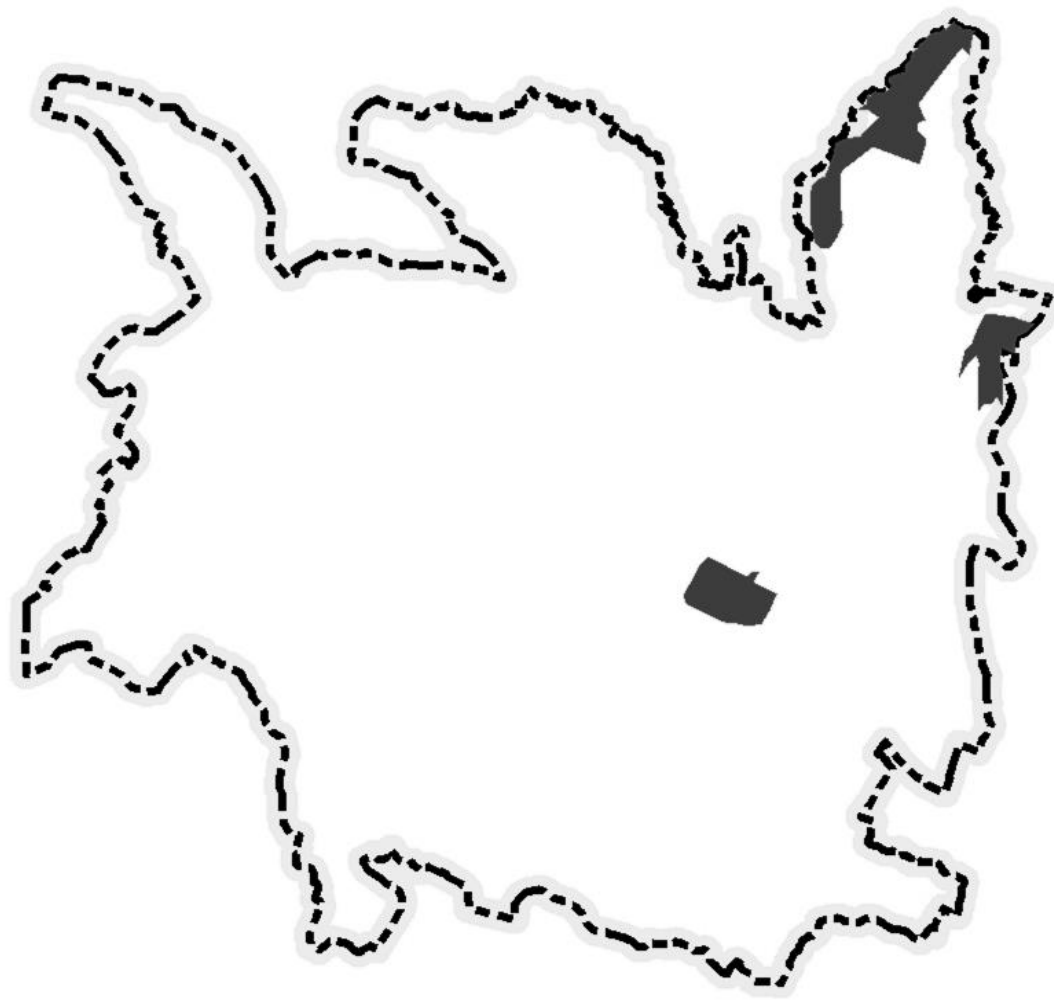


Rural to urban in less than 30 years

Google Earth

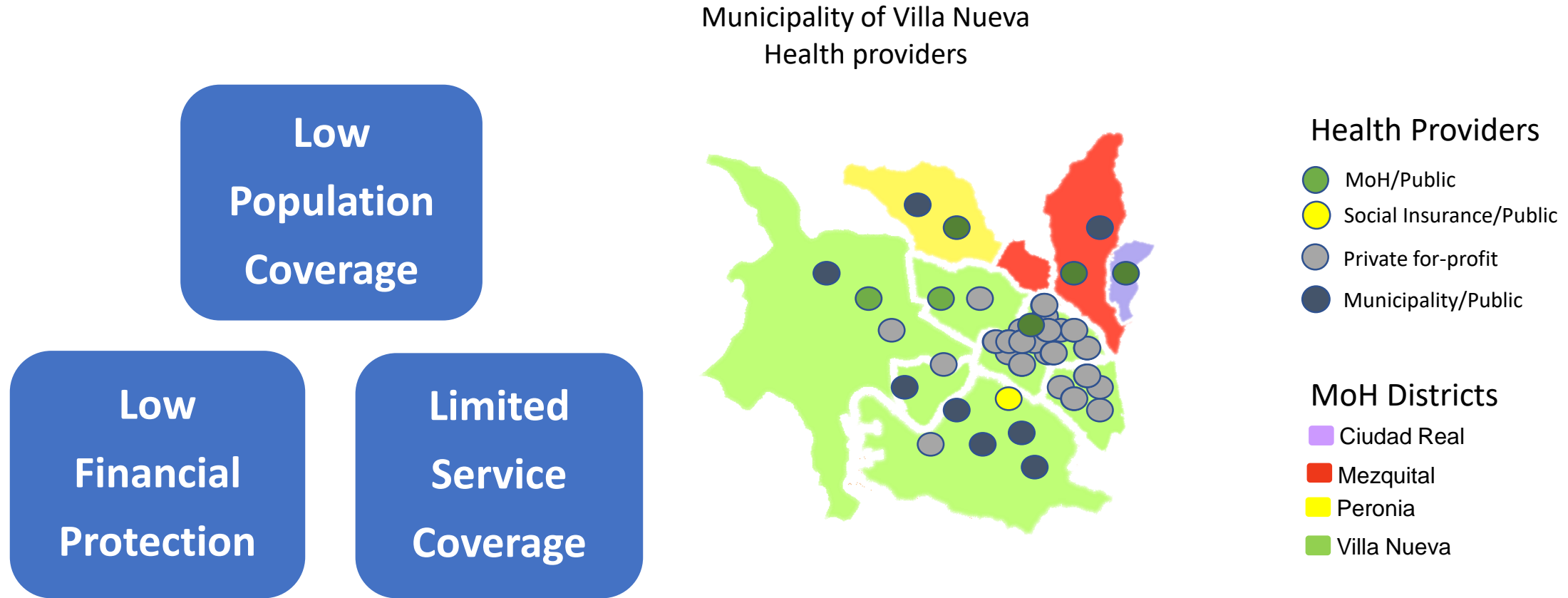


1976



*Source: Villa Neva Planning Department, National  
Institute of Statistics, 2002*

# The Local Health System of Villa Nueva



Source: Annual report MoH 2014, Annual report Health department 2015 – MVN, Cadastral Department 2016 – MVN.



# Current situation of PHC in Villa Nueva

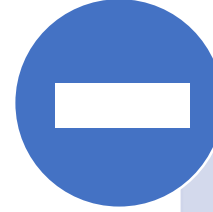


General understanding of main actors that primary health care is more than only health services

Active dialogue and participation of communities, reinforced x Urban HEART

Memorandum of understanding between MoH and local government

Political will to define an interinstitutional framework for action: municipal health policy



Inefficiencies within the administrative bodies of MoH

Lack of resources consolidates over-targeted approach of PHC

Lack of coordination with other health providers including within the MoH

Rural approach mismatches with new urban reality

# Principal Challenges ahead

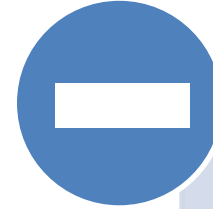


Pilot project to develop guatemala's 1<sup>st</sup> Integrated health services delivery network

Decentralisation framework as means to improve equitable primary health care

Interest of different sectors lead by MoH to implement an integral health reform

Introduction of Health-in-All policies into the planning cycle of local governments



High rotation of authorities of MoH

Early inauguration of hospital may affect implementation of the IHSDN

Cost of interventions and lack of mechanisms for decentralisation

Constant change of MoH priorities set by political agendas

# Thank you for your attention!

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