HEP+ Guatemala Responds to the COVID-19 Pandemic

Under the global Health Policy Plus (HP+) project, the Health and Education Policy Plus (HEP+) program in Guatemala aims to strengthen in-country partners' capacity to navigate complex environments for effective policy design, implementation, and financing aligned to their priorities. Grounded on its mandate to strengthen and advance health policy in HIV, family planning and reproductive health, and maternal health, HEP+ is providing technical assistance to the Ministry of Health (MSPAS) to better respond to the COVID-19 pandemic at the national and local levels.

Between March 2020 and September 2021, the COVID-19 pandemic killed at least 13,000 Guatemalans. While the Guatemalan government is meant to provide health services and social assistance to all, its investment in the sector lags behind other countries in Central America. This lack of adequate investment in public health has been laid bare by the catastrophic impact of the pandemic. Hospital data systems are limited in triggering responses to health crises, many hospitals lack critical care units, and the amount of equipment and personnel are insufficient. At the pandemic onset, MSPAS prepared a COVID-19 response plan and increased its overall budget by 19 percent (US\$201.8 million) to allow for more staff, medical equipment, personal protective equipment (PPE), laboratory supplies, and medicines. Even so, the health sector still was unable to meet the sharp increase in demand for care. HEP+ technical assistance supports Guatemala's COVID-19 response in several areas.

Our Response and Impact

Coordination, planning, and monitoring and evaluation (M&E). In Guatemala, we facilitate collaboration among key actors and have developed guidelines for improving intensive care, surveillance and case management, health information systems, and M&E tools for decision making. For example, we:

- Trained 743 officials from MSPAS in efficient budget management.
- Developed the national vaccination plan and provided assistance in implementation.
- Launched https://registrovacunacovid.mspas.gob.gt, where Guatemalans can register for vaccination appointments.
- Developed a rural vaccination strategy for remote areas, achieving in four weeks an increase among people who had at least one dose: from 17 percent to 24 percent in Ixcán and from 6 percent to 23 percent in Ixil.

Operational and logistic support. We are facilitating collaboration between MSPAS and USAID for U.S. Government donations and are coordinating support from multilateral organizations and USAID implementing partners. Two achievements include:

 Developed the "Stratification of Municipalities to Address and Manage the COVID-19 Pandemic," for MSPAS COVID-19 containment strategies.





 Facilitated delivery of nearly 86,000 masks to Indigenous groups in the Western Highlands.

Case management. We are mitigating hospital overflow and avoiding hospital-borne infections by training staff in triage and case management, developing new protocols for severe COVID-19, and creating procedures for isolation and recovery. We developed virtual platforms for healthcare worker communication, developed home-care recommendations, and assessed facilities and capacity building impact. For example, we:

- Trained 259 healthcare workers to use mechanical ventilators and 1,475 on COVID-19 diagnosis and treatment.
- Set up respiratory care centers in Baja Verapaz and Jutiapa health area directorates, plus 12 in other municipalities.

Surveillance, case finding, rapid response teams, case investigation, and contact tracing. We designed a surveillance strategy for COVID-19 cases and contacts and a strategy for monitoring

vaccine adverse effects. We also are training epidemiologists and supporting governmental agencies' antibody surveys. We designed and deployed contact tracing tools in all 29 health areas.

Risk communication and community engagement. We build capacity among Guatemalan civil society for advocacy, public policy, and information campaigns to promote infection prevention and control (IPC) and vaccine uptake. Specifically, we:

- Conducted community engagement through civil society partners on COVID-19 IPC, including a radio show reaching nearly one million people.
- Provided a COVID-19 course to civil society partners, attended by 213 members.



Infection prevention and control. We coordinate with Guatemalan governmental and nongovernmental agencies on strategies to limit COVID-19 spread, determine PPE needs, deliver training on community response, and update IPC norms to evaluate hospital compliance. We also helped develop guidelines for opening shopping, public transport, and education centers, as well as guidelines on screenings at airports and along borders. Our achievements include:

- Installed 559 vaccination posts by September 2021 and 49 information/registration kiosks for citizens without internet.
- Reached 207 healthcare professionals in workshops on COVID-19 spread, IPC norms, and the use of PPE.

Essential services. We are supporting civil society and governmental partners to monitor maternal and child health, gender-based violence, and nutrition and food security indicators, and to advocate for the continuation of these essential services amid the pandemic. We supported Guatemala's National Contraceptive Security Commission to define family planning guidelines in the context of COVID-19, analyze and report the supply and demand of family planning services, and conduct a study on the effects of the pandemic on other health services.

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