Strengthening health systems and addressing inequality in LAC

Health, Nutrition and Population Global Practice

Latin America and the Caribbean Region

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#INVESTinPeople :: **#INVEST**inHealth

LAC tops the world in inequalities in health and human capital outcomes, even before the pandemic...

Health outcomes highly correlated with GDP per capita across countries and with education and wealth levels within countries

> By education 40% Primarv Secondar 30% Antidua and Barbuda 0 🔵 y O Chile \bigcirc Higher Brazil 20% Grenada O Panama 10% 0% \cap Dominican Republic Columbia Guvana Haiti Bolivia Dominican Honduras Peru (2018) (2015) (2012) Republic (2009)(2011 - 2012)(2012)(2013)Latin America & Caribbean Bv wealth 40% Lowest Second 30% Middle Fourth 20% Highest 10% 10.2 10.4 9.8 10.0 0% Haiti Bolivia Columbia Dominican Guvana Honduras Peru (2018) (2015) Republic (2009)(2012) (2011 - 2012)(2012)

> > (2013)

Adolescents (15–19 years) Who

had Begun Childbearing

Child Survival (Boys & Girls)

OO Honduras

Nicaragua

El Salvador O

 \circ

O Guatemala

 \circ

Guyana

Ecuador

 \bigcirc

Paraguay

Ó

Dominica

9.4

9.6

 \bigcirc \bigcirc \bigcirc OPeru \circ

Source: World Bank, Human Capital Project, 2020

8.0

8.2

8.4

8.6

8.8

9.0

Log GDP per capita at PPP, circa 2020

92

0.99

0.98

0.97

0.96

0.95

0.94

Haiti

7.6

7.8

0

7.4

circa 2020

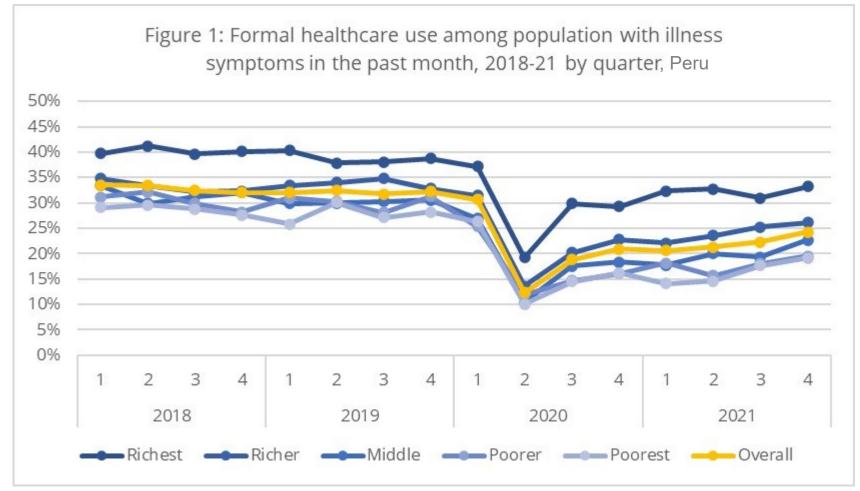
S,

Age

ival to

Probability of Surv

... and COVID-19 has drastically disrupted access to services and outcomes amongst all populations



Source: Preliminary World Bank Analysis based on Encuesta Nacional de Hogares. Peru Instituto Nacional de Estadistica e Informatica

Figure 6.5. Change in health expenditure by government scheme and compulsory insurance scheme as a share of GDP, 2010-17

Before the pandemic, the level and composition health expenditures vary across countries with important equity implications

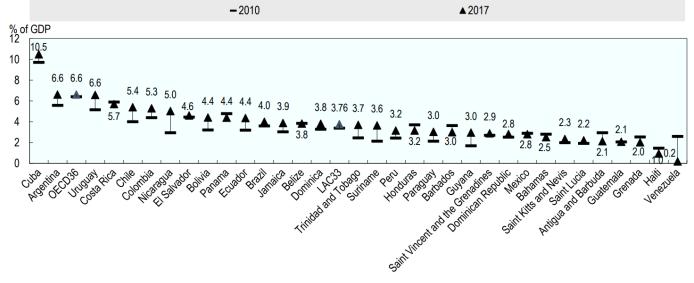
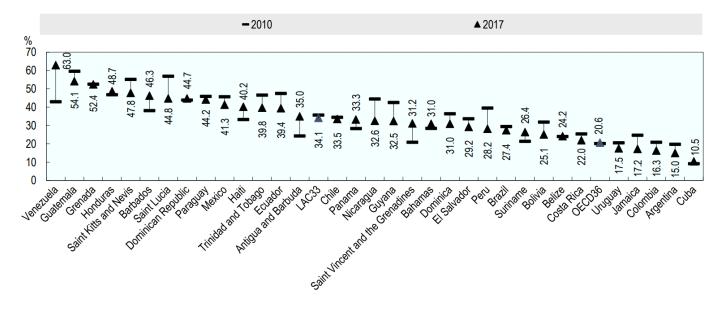
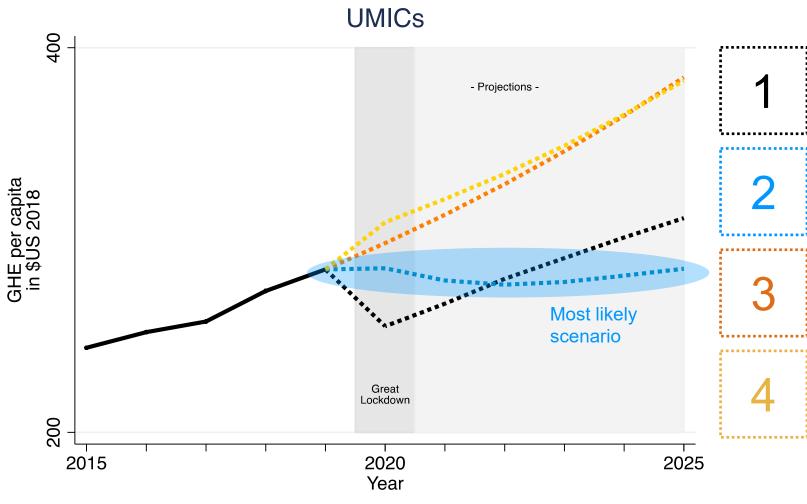


Figure 6.8. Change in out-of-pocket spending as a share of current expenditure on health, 2010-17



Prospects for health spending post -COVID are dire



Government decisions about per-capita health spending follow the same, procyclical approach observed in the past (**unlikely in view of the evidence from 2020**).

Governments choose to hold the prepandemic share of health in government spending constant (**most likely**)

Governments protect the pre-pandemic trends in the growth of per capita government health spending (**optimistic**)

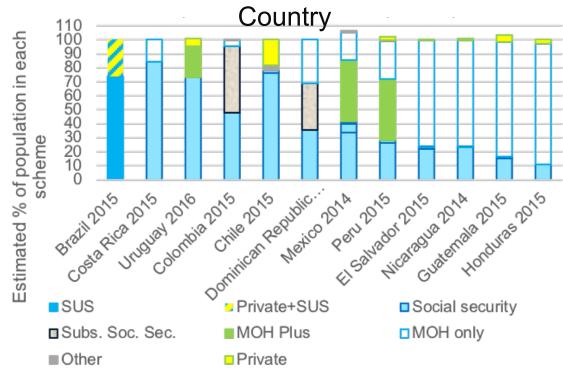
Governments increase spending at the pre-pandemic growth rate, compensating also for lower OOP (**very optimistic**)

Source: World Bank (2021): From Double Shock To Double Recovery - Implications And Options For Health Financing In The Time Of Covid-19

System fragmentation further puts sustainability at risk...

Health systems have not adjusted to the ground reality over the last decades:

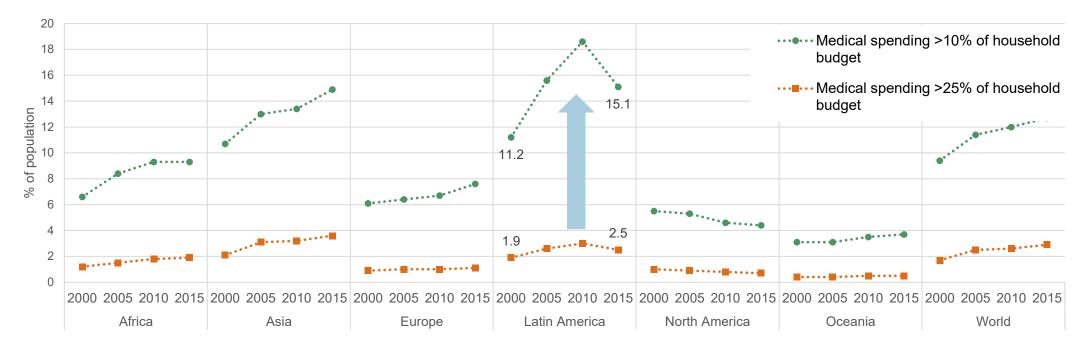
- The lack of social health insurance for the informally employed continues to perpetuate inequality in access and quality of care and financial protection
- Since the formalization of labor markets does not advance different resource mobilization and pooling arrangements are needed



Health System Coverage in LAC by

... and has large negative impacts for system efficiency and inequality in outcomes

Despite declines in out-of-pocket expenditures, LAC still has the highest percentage of population spending a catastrophic share of their income on health: 15.1%



Catastrophic Out-of-Pocket Medical Spending, 2000–2015

Source: Global Monitoring Report on Financial Protection in Health 2019