

Health Program Factsheet

Overview

Guatemala has some of the worst health indicators in the Americas: 2nd highest maternal and child mortality rates (only 2nd to Haiti) and the highest fertility rate in the hemisphere. Furthermore, in the highlands of Guatemala more than 70% of pregnant women deliver at their home which increases the risks for both mother and newborns. Save the Children (SC) aims to assure and improve better access to quality health and nutrition services for children and women in the Western Highlands, a region with the lowest health, education and social development indicators in Guatemala.

Our response

SC works with community health workers, families, national and local governmental authorities and community leaders to assure women and children be informed, learn skills, knowledge and tools that they need in order to have a healthier and productive life. Community health workers support SC staff during home visits to identify danger signs and to refer immediately to the nearest health facility, as well as give advice to women on how to take care of their newborns and themselves.

Save the Children has reached more than 50,000 women and men of reproductive age, 7,000 pregnant and postpartum women and their newborns and more than 6,000 children under five years of age and improved the access and quality of health services

To reduce newborn mortality SC is currently working and testing an attention model that integrates medical with community level though the IMCI, carrying out four home visits over the first 28 days of postpartum, since within this period is the highest risk of newborn deaths at community level.

To reduce mortality among children under 5 years of age, SC is implementing the “Community Case Management” (CCM) strategy to deliver life-saving care, through

training for community elected personnel with skills enable to assess, identify and classify common but serious childhood infections such as pneumonia and diarrhea and to be able to deliver antibiotics in place or to refer severe cases. This successful strategy aims to demonstrate that through adequate training and follow up, community health workers are capable to quality and opportune medical attention to children reducing costs of health programs.

To improve the health status of adolescents, SC is testing a model with over 5,000 poor adolescents in rural areas, providing sexual education and reproductive health services in coordination with local authorities. With USAID’s support the program has also adapted a model called “Friendly Spaces” that provides adolescents with a safe space within their community, where they receive training and advice on sensitive topics related to their sexual and reproductive health as well as to receive guidance on how to set personal life goals and develop skill.

To reduce the risk and mortality of pregnant women, SC implements a strategy that promotes ante natal care and labor and deliveries by a trained health provider, as well as immediate post partum follow up within the first 48 hrs.



CCM Community Health worker

	Saving Newborn Lives	Community Case Management	Aktichil Adolescents
Beneficiaries	21 communities in 2 municipalities 14,485 pregnant women 783 expected births	51 communities in 5 municipalities 6,772 children under 5 years of age	6,163 women and male adolescents between the ages 12 and 23 years old
Note:	Funding is indirectly allocated to Guatemala from the SC Bolivia office.		

Geographical Coverage

