# PROJECT INFORMATION DOCUMENT (PID) IDENTIFICATION/CONCEPT STAGE

Report No.: PIDC98210

Project Name	PANAMA HEALTH INFORMATION SYSTEM PROJECT
Region	LATIN AMERICA AND CARIBBEAN
Country	Panama
Lending Instrument	IPF
Project ID	P162475
Borrower Name	REPUBLIC OF PANAMA
Implementing Agency	Ministry of Health
Environmental Category	C - Not Required
Date PID Prepared	07-Apr-2017
Estimated Date of Approval	23-Jan-2017
Initiation Note Review Decision	The review did authorize the preparation to continue

### I. Introduction and Context

#### **Country Context**

Panama has had the strongest economic growth in the Latin America and Caribbean (LAC) region in recent years. Real GDP growth averaged 7.2 percent between 2001 and 2013, more than double the LAC average. This exceptional growth performance stems from a number of factors including the transfer of Panama Canal management and operations to Panama in 1999, and high rates of public and private investment. The country's rapid growth has been largely pro-poor and has translated into significant poverty reduction. Between 2007 and 2012, the percentage of the population living in poverty (using the national poverty line) declined from 39.9 percent to 26.2 percent, and the percentage living in extreme poverty declined from 15.6 percent to 11.3 percent.

Despite these remarkable gains in the reduction of poverty and shared prosperity, challenges remain. Poverty in Panama is a rural and indigenous territories phenomenon. While in urban areas extreme poverty is below 4 percent, in rural areas is about 27 percent. Moreover, in the "comarcas" -that is, Indigenous Peoples' territories- poverty is above 70 percent and extreme poverty is above 40 percent. Despite strong and fairly inclusive growth at the national level, differing rates of poverty reduction have led to the poor becoming more concentrated in specific geographic areas.

#### Sectoral and Institutional Context

Although substantial amounts of GDP have been devoted to health expenditures, and health indicators have in fact improved, challenges remain. The general population now has a life expectancy of 74.8 years for men and 80.5 for women. The infant mortality ratio declined from 31 per 1,000 live births in 1990 to 17.6 per 1,000 live births in 2014. The maternal mortality ratio decreased from 92 per 100,000 live births in 1990 to 85 per 100,000 live births in 2013. In both cases, MDG targets were not achieved. Despite Panama's significant progress, outcomes are still below what would be expected for

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a country with these levels of health expenditures and economic growth.

Inequality in health is still significant in Panama, particularly in the case of rural and indigenous populations, and is a main concern. The infant mortality rate illustrates this situation. Almost all provinces in Panama have IM rates below 20 per 1,000 live births except four provinces. These four provinces have very high IMR and are inhabited by rural and indigenous communities: Bocas del Toro (IMR is at 30.26 per 1,000 live births), Darien (23.66), Comarca Guna Yala (30.37) and Comarca Ngabe Bugle (32.65). Geographic, cultural and financial factors are leading to lower health outcomes in individuals from rural and indigenous households.

#### **Relationship to CAS/CPS/CPF**

The Grant (P162475) is in line with the Panama Country Partnership Framework FY14-FY21. Pillar 2 of the CPF prioritizes Ensuring Inclusion and Opportunities for Marginalized and Indigenous Groups; and in terms of the health sector, inequality of access and quality of health care for the rural and indigenous population is a main concern. The Grant will provide comprehensive data and statistics for the health sector which will serve as the evidence to understand how effective service delivery is in reaching the most in need.

## **II. Project Development Objective(s)**

#### **Proposed Development Objective(s)**

The objective of the proposed Grant is to support Panama's Ministry of Health effort to integrate different national health information systems in order for better evidence-based policy and decision-making to ensure health service delivery to the areas most in need. The integration involves information systems for water and sanitation, zoonoses and vectors, different types of waste, pollution and environmental risks, among others.

#### **Key Results**

The results expected to be achieved under this Grant are:

-Strengthened national-level decision-making and budget allocation to the health sector based on evidence (data).

-Strengthened health service delivery to areas most in need based and guided on evidence.

## **III. Preliminary Description**

### **Concept Description**

The Government of Panama implemented over the last two decades several initiatives to increase access to health services in rural populations, especially among comarcas, that achieved positive results. A key aspect for continuing strengthening the health system is the health information system. Data related to Panama's population health is currently collected by several different offices and governmental organizations. The health information system needs to be able to integrate all these different health sources for improving decision making and delivery of health services. In assessing the landscape and integration of different health information systems the project will ensure that information is disaggregated to be able to capture specific health data regarding vulnerable groups, particularly indigenous peoples. This will also help to create synergies with other World Bank initiatives in Panama targeting health services and indigenous peoples.

### **IV. Safeguard Policies that Might Apply**

Safeguard Policies Triggered by the Project	Yes	No	TBD
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Environmental Assessment OP/BP 4.01	X
Natural Habitats OP/BP 4.04	X
Forests OP/BP 4.36	X
Pest Management OP 4.09	X
Physical Cultural Resources OP/BP 4.11	X
Indigenous Peoples OP/BP 4.10	X
Involuntary Resettlement OP/BP 4.12	X
Safety of Dams OP/BP 4.37	X
Projects on International Waterways OP/BP 7.50	X
Projects in Disputed Areas OP/BP 7.60	X

## V. Financing (in USD Million)

Total Project Cost:	0.29	Total Bank Financing:	0
Financing Gap:	0		
Financing Source			Amount
Trust Fund for Statistical Capacity Building			0.29

## VI. Contact point

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