

### COUNTRY CONTEXT AT-A-GLANCE

#### GDP per capita

(PPP int'l dollars)  
WDI (2017)

\$20,787

#### Living in poverty

(Under \$1.90 int'l  
dollars / day)  
WDI (2016)

1%

#### Government health spending as % of GDP

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#### Life expectancy at birth

(Years)  
WHO (2016)

77

#### Maternal mortality

(Per 100,000 live  
births)

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#### Neonatal mortality

(Per 1,000 live births)  
WHO est. (2016)

6

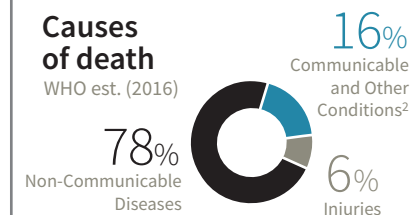
#### Premature NCD mortality<sup>1</sup>

(Probability)  
WHO est. (2016)

16%

#### Causes of death

WHO est. (2016)



### \$ FINANCING

#### PHC spending:



#### Prioritization of PHC:

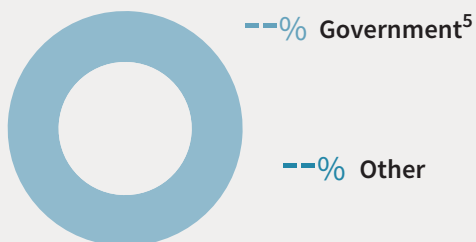
Overall health spending<sup>3</sup>



Government health spending<sup>4</sup>



#### Sources of PHC spending:



### CAPACITY

Primary Health Care Progression Model (2018)<sup>6</sup>

#### Governance



#### Inputs



#### Population Health & Facility Management



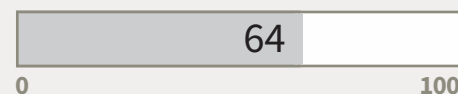
### PERFORMANCE

#### Access Index<sup>7</sup>



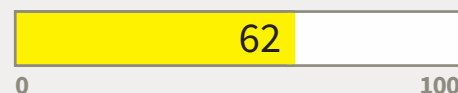
#### Quality Index<sup>7</sup>

Admin. Data Secretaria de Gobierno de Salud (2018)



#### Service Coverage Index

2017 UHC Global Monitoring Report



### EQUITY

#### Access: % with perceived barriers due to cost, by wealth quintile

0 100

#### Coverage of RMNCH<sup>8</sup> services, by wealth quintile

MICS (2011-12 survey)



#### Outcomes: Under-five mortality<sup>9</sup>, by wealth quintile of provinces

DEIS (2016 data)



Note: Indicator values presented here may differ from country data sources due to the application of methods to enhance international comparability. See Indicator Description Sheet for details.

1. Probability of dying between ages 30 and 70 from cardiovascular disease, cancer, diabetes, or chronic respiratory disease
2. Communicable, maternal, perinatal, and nutritional conditions
3. Current PHC expenditure as % of Current Health Expenditure (CHE)
4. Domestic general government PHC expenditure as % of domestic general government health expenditure

5. Domestic general government PHC expenditure as % of current PHC expenditure

6. The PHC Progression Model uses mixed methods to assess foundational capacities of PHC on a scale from 1 (low) to 4 (high)

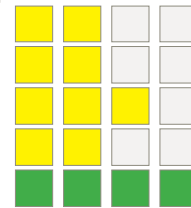
7. Because different data/indicators are used in each country, composite index values may not be comparable across countries. See page 2 for the specific indicators used in this VSP.

8. Coverage of RMNCH services reflects the average coverage of 8 RMNCH interventions along the continuum of care (see indicator description sheet for details)

9. Deaths of children before age 5, per 1,000 live births

**ARGENTINA**
**SCORE**
**GOVERNANCE**
**3.0**
**Governance and Leadership**
**2.6**

- Measure 1: Primary health care policies (1/2)
- Measure 2: Primary health care policies (2/2)
- Measure 3: Quality management infrastructure
- Measure 4: Social accountability (1/2)
- Measure 5: Social accountability (2/2)


**Adjustment to Population Health Needs**
**3.3**

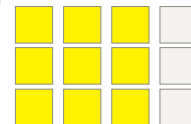
- Measure 6: Surveillance
- Measure 7: Priority setting
- Measure 8: Innovation and learning


**INPUTS**
**2.7**
**Drugs and Supplies**
**3.0**

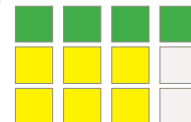
- Measure 9: Stock-out of essential medicines
- Measure 10: Basic equipment availability
- Measure 11: Diagnostic supplies


**Facility Infrastructure**
**3.0**

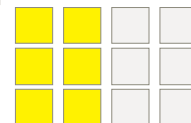
- Measure 12: Facility density
- Measure 13: Facility amenities
- Measure 14: Standard safety precautions and equipment


**Information Systems**
**3.3**

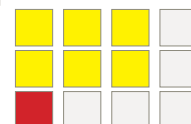
- Measure 15: Civil Registration and Vital Statistics
- Measure 16: Health Management Information Systems
- Measure 17: Personal care records


**Workforce**
**2.0**

- Measure 18: Density and distribution
- Measure 19: Training
- Measure 20: Community health workers


**Funds**
**2.3**

- Measure 21: Facility budgets
- Measure 22: Financial Management Information System
- Measure 23: Salary payment


**POPULATION HEALTH AND FACILITY MANAGEMENT\***
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**Population Health Management**
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- Measure 24: Local priority setting
- Measure 25: Community engagement
- Measure 26: Empanelment
- Measure 27: Proactive population outreach


**Facility Organization and Management**
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- Measure 28: Team-based care organization
- Measure 29: Facility management capability and leadership
- Measure 30: Information system use
- Measure 31: Performance measurement and management (1/2)
- Measure 32: Performance measurement and management (2/2)



\* The Capacity domain was assessed at the national level for the purpose of this Profile. However, measures for Population Health Management and Facility Organization and Management cannot be accounted for at the national level, given that Argentina has a federal and decentralized system, where PHC is devolved to the local level.

<b>ARGENTINA</b>	<b>SCORE</b>	<b>PERCENTAGE</b>	<b>SOURCE</b>	<b>YEAR</b>
<b>ACCESS</b>				
<b>Financial</b>				
<i>No recent indicator available from international or national data sources</i>				
<b>Geographic</b>				
<i>No recent indicator available from international or national data sources</i>				
<b>QUALITY</b>		<b>64</b>		
<b>Comprehensiveness</b>				
Average availability of RMNCH services**	<b>79%</b>		<i>Admin Data Secretaria de Gob. de Salud</i>	<i>2018</i>
Average availability of NCD services**	<b>70%</b>		<i>Admin Data Secretaria de Gob. de Salud</i>	<i>2018</i>
<b>Continuity</b>				
DTP3 dropout rate*	<b>6%</b>		<i>WHO/UNICEF</i>	<i>2017</i>
Treatment success rate for new TB cases	<b>47%</b>		<i>WHO TB Programme</i>	<i>2015</i>
<b>Person-Centeredness</b>				
<i>No recent indicator available from international or national data sources</i>				
<b>Provider availability</b>				
<i>No recent indicator available from international or national data sources</i>				
<b>Provider Competence</b>				
Early antenatal care**	<b>41%</b>		<i>Admin Data Secretaria de Gob. de Salud</i>	<i>2018</i>
Adherence to guidelines for child health**	<b>33%</b>		<i>Admin Data Secretaria de Gob. de Salud</i>	<i>2018</i>
Adherence to guidelines for adolescent health**	<b>61%</b>		<i>Admin Data Secretaria de Gob. de Salud</i>	<i>2018</i>
<b>Safety</b>				
<i>No recent indicator available from international or national data sources</i>				
<b>SERVICE COVERAGE</b>		<b>62</b>		
<b>Reproductive, Maternal, Newborn and Child Health</b>				
Demand for family planning satisfied with modern method	<b>85%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
Antenatal care coverage (4+ visits)	<b>90%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
Coverage of DTP3 immunization	<b>94%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
Care-seeking for suspected child pneumonia	<b>94%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
<b>Infectious diseases</b>				
Tuberculosis cases detected and treated	<b>45%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
People living with HIV receiving anti-retroviral treatment	<b>63%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
Children under 5 with diarrhea receiving ORS	<b>18%</b>			<i>MICS 2011-12</i>
<b>Non-Communicable Diseases (NCDs)</b>				
% of population with normal blood pressure***	<b>77%</b>		<i>UHC Global Monitoring Report</i>	<i>2017</i>
<p>*These variables must be transformed by subtracting the value from 100 when calculating summary scores. **Country-specific (proxy) indicator, used in absence of globally comparable survey data; data from Programa SUMAR, public sector only. ***Age-standardized (see detailed indicator descriptions). Note: Summary scores for the domains of Access, Quality, and Coverage are calculated by taking the average of indicator values within each subdomain, and then taking the average across subdomain scores.</p>				