

Honduras



Honduras is located at Central America's extreme north. It borders El Salvador, Nicaragua, and Guatemala, and has coastlines on the Caribbean Sea and the Pacific Ocean. The country extends for 112,492 km². Its topography is irregular, with mountains, valleys, and plains, and 19 river basins. Honduras is rich in biodiversity. It is governed as a democratic and representative republic; its government includes legislative, executive, and judicial branches. The country's political and administrative organization encompasses 18 departments, 298 municipios, 3,731 villages, and 30,591 hamlets. The capital is the Central District, which is made up of Tegucigalpa and Comayagüela.

The country's average annual economic growth from 2001 to 2010 was 6%. However, in 2009, the country's serious political crisis and the world economic crisis slowed growth. In 2010 the Country Vision 2010–2038 and National Plan 2010–2022 law was approved. With regard to health, this law prioritizes sectoral reform. It also develops a comprehensive care model and promotion and prevention actions. In 2010, life expectancy at birth was 73.6 years. Over the 2006–2010 period, there were achievements in maternal and child health, immunization, communicable diseases, and regulatory changes in noncommunicable disease control.

MAIN ACHIEVEMENTS

HEALTH DETERMINANTS AND INEQUALITIES

From 2001 to 2009, the total poverty rate was reduced by 4.9 percentage points and extreme poverty by 7.8 percentage points. In 2010, 58.8% of households lived in poverty (64.4% in rural areas). The monthly average income was US\$ 252 (US\$ 375 in urban areas and US\$ 152 in rural areas).

Illiteracy fell to 17% in 2010. School enrollment for children 6–11 years of age reached 89.5% in 2009. The Second Gender Equality and Equity Plan 2010–2022 was prepared.

In 2010 the Secretariat of State for the Development of Indigenous and Afro-Honduran People and Racial Equality Policies was created. Together, the country's six indigenous groups and two groups of people of African descent make up 7.2% of the population.

THE ENVIRONMENT AND HUMAN SECURITY

Between 2006 and 2010 the coverage of water supply services increased from 84% to 86% (81.3% for rural dwellings and 95% for urban residences). In 2009, 78.2% of the dwellings had access to sewerage and basic sanitation services (62% in rural areas and 80% in urban areas), thus achieving one of the Millennium Development Goal (MDG) targets.

In 2010 a national strategy was prepared to help adapt to and mitigate the effects of climate change. Honduras ranks third in the world in terms of exposure and vulnerability to the risks of climate change.

In 2009 the National Risk Management System Law was enacted, to create a legal framework so the country is able to prevent and decrease the risks of potential disasters. This step represents an important achievement in disaster preparedness.

Selected basic indicators, Honduras, 2006–2010.

Indicator	Value
Population 2010 (millions)	8.0
Poverty (%) (2010)	58.8
Literacy (%) (2007)	83.6
Education (years) (2010)	5.0
Life expectancy at birth (years) (2010)	73.6
General mortality rate (per 1,000 population) (2010)	4.6
Infant mortality rate (per 1,000 live births) (2006)	23.0
Maternal mortality (per 100,000 live births) (2010)	74.0
Physicians per 1,000 population (2008)	0.3
Hospital beds per 1,000 population (2010)	0.8
DPT3 immunization coverage (%) (2010)	100.0
Births attended by trained personnel (%) (2006)	66.9

HEALTH CONDITIONS AND TRENDS

The updating of the regulatory framework on care for women and newborns made possible a substantial increase in prenatal and childbirth professional care, as well as in access to family planning methods. Infant mortality was reduced by 12% between 1995 and 2006 (23 per 1,000 live births in 2006). Mortality in children under 5 years of age decreased as a result of the reduction in deaths due to diarrhea and acute respiratory infections.

There were several outbreaks of dengue between 2005 and 2010. The largest, which occurred in 2010, had 66,814 cases and a 2.6% case-fatality rate. Over that same time span, the incidence of malaria was reduced substantially. There were 9,085 cases in 2010, thus reaching the MDG target. Interruption of transmission of Chagas' disease by *Rhodnius prolixus* was certified. In 2009, 17 cases of canine rabies and one case of human rabies were reported. Leptospirosis occurs throughout the country. In 2010, a total of 92 cases were reported, with a 7.5% case-fatality rate. Seventeen cases of leprosy were diagnosed, all in the department of Choluteca. The MDG target for tuberculosis (TB) was achieved. Since 2000 there has been a steady downward trend in the prevalence of TB. In addition, TB mortality decreased from 18.0 to 7.9 per 100,000 population between 1990 and 2009 (56% reduction).

The Ministry of Health assessed data on hospital discharges for 2008 and 2009 for female and male patients treated for malignant neoplasms. In women, cervical cancer and breast cancer were the main causes of medical care (24.1% and 10.3%, respectively). In men, the primary causes of medical care were acute lymphoblastic leukemia (13.5%) and stomach cancer (13.1%). Chronic, noncommunicable diseases (NCDs) are considered in the current National Health Plan.

HIV/AIDS and Other Sexually-transmitted Infections

In 2008 Honduras was the second most affected country in Central America by the HIV/AIDS epidemic, with a prevalence level of 0.68%. The epidemic is concentrated mainly in the urban areas on the Atlantic coast and in the central area of the country. The highest number of cases occurs among persons between 15 and 39 years of age. From 2005 to 2010 the male/female ratio of HIV transmission was 1.4. AIDS affected 2,964 men and 3,194 women, with a male/female ratio of 0.9.

In 2010 the health services provided care for 44,312 women who had prenatal examinations for the first time. A total of 69% of them took the HIV infection test, and 0.2% were found positive. Access to antiretroviral therapy has increased. From 1985 to 2010 a cumulative total of 7,326 people received treatment; 1,196 of them died and 1,334 discontinued therapy.

According to the "Towards Universal Access" report of 2010, 322 of the 1,510 health facilities (21%) that provided prenatal care also had HIV testing and counseling services for pregnant women. Eighty percent of the pregnant women who took the HIV test received the result during pregnancy, childbirth, or the puerperium. There are 37 comprehensive health care centers distributed throughout the 18 departments and the 20 health regions of the country. In all of these centers, treatment is offered for prevention of mother-to-child transmission of HIV.

A national plan of action of the program for prevention of mother-to-child HIV transmission and elimination of congenital syphilis was developed in 2010.

In 2010 the Special Tobacco Control Law took effect, and the National Strategic Plan for Cancer Prevention and Control 2009–2013 was initiated.

By achieving prevalence levels of 30.1% for chronic malnutrition, 1.4% for acute malnutrition, and 8.7% for overall malnutrition in children under 5 years of age, Honduras has met the MDG 1 targets.

HEALTH POLICIES, THE HEALTH SYSTEM, AND SOCIAL PROTECTION

The Executive Branch, through the Ministry of Health, exercises authority over health and coordinates the activities of the sector through a national health plan. The National Health Plan 2006–2010 prioritized sectoral reform, maternal and child health and nutrition, and prevention and control of communicable diseases and NCDs.

Among the country's national policies that focus on health issues are ones dealing with maternal and child health, sexual and reproductive health, nutrition, and mental health.

The National Health Plan 2010–2014 includes the bases for adopting a model of comprehensive family and community care, establishing a national quality system, strengthening surveillance, reinforcing the evaluation system, and mapping out a health information system.

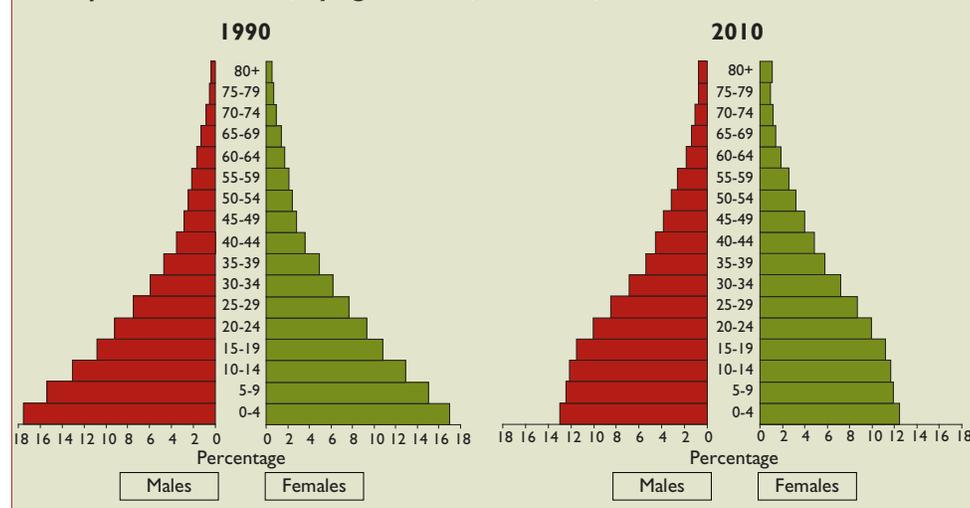
According to the budget of the Ministry of Health, 76% of the funds invested in health are from the National Treasury, 11% from foreign borrowing, 9% from donations, and, recently, 4% from relief of the national debt. Between 2005 and 2010, the proportion of those health expenditures going toward medicines ranged between 9.7% and 12.8%. The Ministry of Health operates 28 hospitals, 61 maternal and child health clinics, 394 urban health centers, 1,048 rural health centers, 4 peripheral emergency clinics, and 14 family counseling centers that specialize in managing family violence.

KNOWLEDGE, TECHNOLOGY, AND INFORMATION

In 2008 the National Health Research System was created.

The Virtual Health Library continues to include new subjects and sources of information. In a 2006 assessment of the health information system, the Ministry of Health pointed to the lack of a governing unit, an incomplete legal framework, personnel with insufficient training, and limited use of information. With the support of PAHO, a strategic plan to strengthen the system was prepared. This plan includes nine strategic objectives, one of which concerns vital statistics.

Population structure, by age and sex, Honduras, 1990 and 2010.



MAIN CHALLENGES AND PROSPECTS

Among persons over 15 years of age, the average amount of education completed is 5 years. Of the population with some level of education, 85% of them have only finished primary school, and just 3% have completed a higher level. Only 60% of the children who enroll in first grade ultimately finish primary school. The MDG target for education will probably not be met as long as structural problems that affect the educational system remain unresolved.

Approximately 1.6 million Hondurans (20% of the population) are unemployed. The unemployment rate for women is twice as high as that for men. One-fourth (25.4%) of youth aged 15–24 years do not study or work, and they have few possibilities of joining training programs. In 2006 the wages of women represented 67% of the average wages of men with equivalent working conditions and capacities.

The availability of drinking water poses a major challenge. In rural areas, the water is not chlorinated. In urban areas, lack of continuity of service and network deficiencies cause pollution of the water that has been adequately chlorinated at the source.

Wastewater treatment coverage was only 27.3% in 2009. In 2010, 4,880 tons of waste were generated daily, but only 20% of the municipalities had collection services, and just 4% had adequate waste disposal facilities. Most of the waste is disposed of in open air dumps.

Honduras identified a total of 3.6 tons of pesticides considered to be persistent organic pollutants. However, the country lacks the capacity to manage and reduce these pollutants.

Pregnancy in adolescents is considered to be a health sector problem and is currently a priority of the National Plan. In 2009, 22.6% of the adult population of Tegucigalpa had hypertension, 6.2% had diabetes, and 53% had high levels of total cholesterol. Furthermore, 7.3% of this population smoked, 11.3% consumed alcohol, and 51.7% were overweight or obese. Cardiovascular diseases are more common in women (231.9 per 100,000 population) than they are in men (169.1 per 100,000). As a result of the lack of consolidation and the underreporting of information on cancer, its incidence, prevalence, mortality, and survival rate are not known.

The registry of vital records is incomplete, and the quality of the declaration of cause of death is deficient. Out of the total hospital deaths in 2009, perinatal disorders were the most common (16.3%), followed by diabetes (6.7%) and congenital malformations (6.7%). Hypertension, stroke, and ischemic heart disease accounted for 20.1% of the total deaths, and 8% were attributed to external causes.

The risk of death due to traffic accident increased from 2006 to 2010. There is no national policy on road safety aimed at reducing the high accident rate. Homicides increased from 3,118 in 2006 to 6,239 in 2010. As a result, the country is one of the most violent in the Region of the Americas. There is a mental health policy. However, 88% of the resources invested are assigned to the two existing psychiatric hospitals, showing that providing preventive services in mental health care is a challenge.

The National Health Plan 2010–2014 points the way towards a system of social health protection based on linking care, management, and financing. Special attention is given to health promotion, decentralization, quality, and broad social participation. However, limited progress has been made. Few changes have been seen in the care model or the impact on the health of the population.

In 2008, there were 6,792 physicians in the country, but only 54.1% of them were active. Of the practicing physicians, 2,323 of them (63.2%) were employed by the Ministry of Health, 880 (23.9%) by the private sector, and 474 (12.9%) by the Honduran Institute of Social Security. There is disparity of distribution by department, ranging from 23.8 physicians per 10,000 population (in Francisco Morazán) to only 2 physicians per 10,000 population (in Lempira and in Santa Bárbara).

The productivity of hospitals is low, considering that they receive 42% of the total budget of the Ministry of Health. Contributing to the reduced productivity and quality of hospital services are problems in resource management, along with insufficient supply and distribution of medicines and other critical supplies.

As a lower-middle-income country, Honduras has priority for PAHO assistance, and it also receives support from the international community to develop its health programs. Official development aid rose by approximately 30% in the 2004–2009 period, to US\$ 119.6 million, including a substantial increase in funding for the area of HIV and sexually-transmitted infections.

In spite of the progress made in achieving MDG targets, Honduras faces important challenges related to the National Plan and Country Vision, as well as to the Health Agenda for the Americas 2008–2017. These challenges concern strengthening the national health authority, with a clear characterization of the orientation of the health services. Identifying health inequities should accompany strategies to address the determinants of health and measures that ensure social protection. In order to contribute to world safety, Honduras will need to comply with the International Health Regulations. To successfully address these challenges will require the country to improve the management and education of health workers.