Bangladesh

Investment Case Priorities

- 1 Strengthen governance and stewardship of the public and private health sectors.
- 2 Undertake institutional development for improved performance at all levels of the system.
- **3** Provide sustainable financing for equitable access to health care and accelerated progress towards universal health coverage.
- **4** Strengthen the capacity of the Ministry of Health and Family Welfare's core health systems (Financial Management, Procurement, Infrastructure development).
- **5** Establish a high-quality health workforce available to all through public and private health service providers.
- 6 Improve health measurement and accountability mechanisms and build a robust evidence base for decision making.
- 7 Improve equitable access to and utilization of quality health, nutrition, and family planning services.
- 8 Promote healthy lifestyle choices and a healthy environment.
- **9** Promote keeping girls in school and reducing drop-out rates among girls in secondary schools.

RMNCAH-N Data

CORE IMPACT INDICATORS

Maternal mortality Under-five mortality ratio ratio 194 per 100,000 live 46 per 1,000 births live births

Adolescent

per 1,000

women

birth rate 113

Neonatal mortality ratio 28 per 1,000 live births

COVERAGE INDICATORS***

16%

Modern

54.1%

Rate





Percent of births

the preceding

birth 11.3%

Stunting among

children under

5 years of age

36%

<24 months after

Moderate to

severe wasting

among children

under 5 years

of age 14%

81%

77%

72%

68.5%

36.4%

Health Financing Indicators

CORE HEALTH FINANCING IMPACT INDICATORS

Health expenditure Ratio of government Percent of per capita financed health expenditure from domestic to total government sources 4.68 expenditures 3.37%

Identified options

for strengthening

domestic resource

mobilization **Yes**

strategies to reduce

Implemented

key drivers of

In relation to

RMNCAH-N

services) No

inefficiency Yes

Identified drivers

of limited financial

protection (especially

current health expenditures on primary/outpatient health care Not available

Taken actions

Implemented

domestic resource

mobilization **Yes**

reforms to address

identified drivers of

financial protection

RMNCAH-N) Yes

(especially related to

to support

OUTPUT INDICATORS

Share of health in total government budget **5.2%**

Monitoring of catastrophic and impoverishing health expenditure with data less than three vears old No

Country has: implemented or updated a resource mapping exercise No

DTP3 dropout rate 5.7%

EFFICIENCY

ANC dropout rate 51%

Health budget execution rate 90%

World Bank-funded Project

(IDA/IBRD/GFF)

COUNTRY	Bangladesh (Health)	Bangladesh (Education)
BOARD DATE	7/28/17	12/18/17
GFF APPROVED AMOUNT	\$15M	\$10M
IDA AMOUNT	\$500M	\$510M



***ANC4 = four antenatal care visits; ART = antiretroviral therapy; ARV = antiretroviral; DTP3 = vaccination for Diphtheria, Tetanus, and Pertussis; ORS = oral rehydration solution; PMTCT = prevention of mother-to-child transmission; PNC = postnatal care.

Geographic Focus Areas

Incidence of catastrophic and impoverishing health expenditures **25%** catastrophic 8.1% impoverishing

Share of external funding for health that is pooled or on budget 26.78%



FOCUS AREAS

Resource Mapping

The GFF is supporting Bangladesh in aligning financing and technical support with a focus on improving RMNCAH-N outcomes. Through support to the government's programs in both the health, nutrition and population and the education sectors, the GFF is catalyzing the coordinated impact of international financing totaling more than US\$1 billion and influencing domestic government spending of US\$30 billion in the two sectors over five years. The Health Sector Support Project is financed by US\$15 million from the GFF, US\$500 million from IDA, US\$23 million from Sweden, US\$13 million from the Netherlands, US\$60 million from the United Kingdom (and proposed co-financing from other partners). The Health Sector Support Project contributes to the government's Fourth Health, Nutrition and Population Sector Program through a results-based strategy. The project supports development of health system governance, management and service delivery capacities, implementation of an Essential Services Package, and a focus on lagging regions.

