

# The Republic of Cameroon

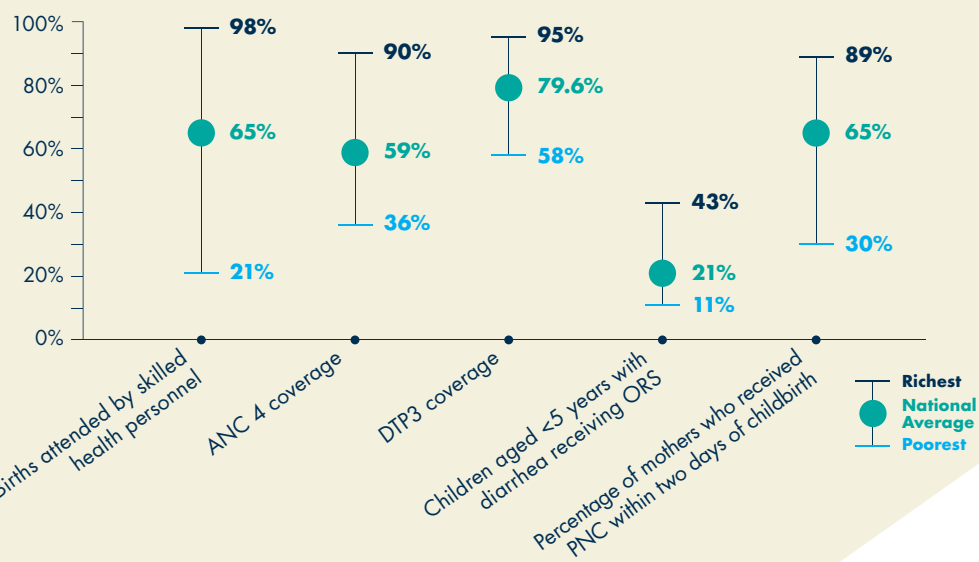
## RMNCAH-N Data

### CORE IMPACT INDICATORS

Maternal mortality ratio <b>596 per 100,000 live births</b>	Under-five mortality ratio <b>103 per 1,000 live births</b>	Percent of births <24 months after the preceding birth <b>21.3%</b>	Moderate to severe wasting among children under 5 years of age <b>5%</b>
Neonatal mortality ratio <b>28 per 1,000 live births</b>	Adolescent birth rate <b>119 per 1,000 women</b>	Stunting among children under 5 years of age <b>32%</b>	

### COVERAGE INDICATORS\*\*\*

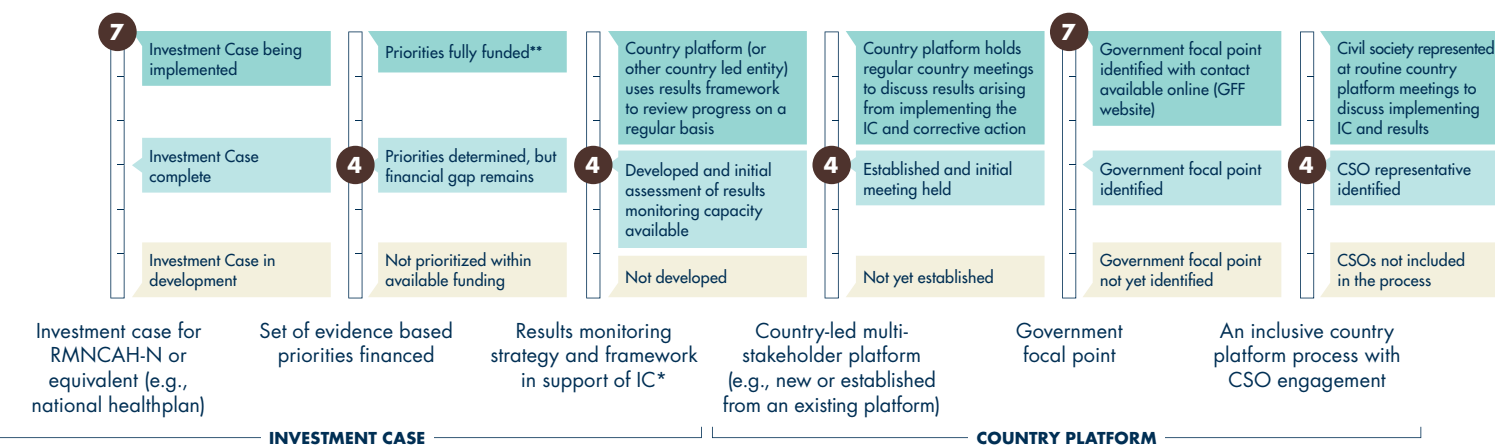
People living with HIV receiving ART <b>37%</b>	Coverage of pregnant women who receive ARV for PMTCT <b>74%</b>	Children aged <5 years with pneumonia symptoms taken to a healthcare provider <b>28%</b>	Modern contraceptive prevalence rate <b>21%</b>
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## Investment Case Priorities

- Pursue a health financing strategy that allocates resources based on results, focuses attention on high-burden regions, and ensures that resources make it to primary and secondary healthcare facilities.
- Leverage the comparative advantages of the private sector through performance-based contracting.
- Use targeted subsidies to ensure access to healthcare services among the poor.
- Strengthen community-level interventions through community health workers and qualified community organizations.
- Focus effort on high-impact health interventions like Kangaroo Mother Care (to address newborn mortality) and family planning while also taking a multisectoral approach to address key social determinants for RMNCAH-N outcomes.
- Focus on the health needs of adolescents to ensure access to services, mentoring, and education (pilot performance-based financing in education)

## Monitoring the Country-led Process



\*Both included in the IC document or a separate document \*\*Meaning that funding was allocated, disbursed and released – payment done \*\*\*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.

## Health Financing Indicators

### CORE HEALTH FINANCING IMPACT INDICATORS

Health expenditure per capita financed from domestic sources <b>9.2</b>	Ratio of government health expenditure to total government expenditures <b>3.11%</b>	Percent of current health expenditures on primary/outpatient health care <b>61.76%</b>	Incidence of catastrophic and impoverishing health expenditures <b>10.8%</b> catastrophic <b>1.8%</b> impoverishing
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### OUTPUT INDICATORS

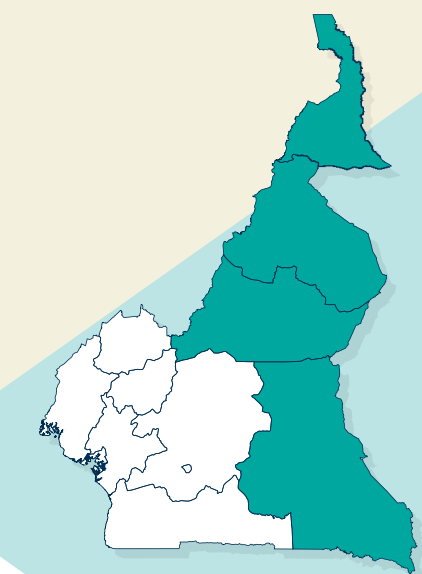
Share of health in total government budget <b>4%</b>	Identified options for strengthening domestic resource mobilization <b>No</b>	Taken actions to support domestic resource mobilization <b>No</b>	Share of external funding for health that is pooled or on budget <b>56.6%</b>
Monitoring of catastrophic and impoverishing health expenditure with data less than three years old <b>No</b>	Implemented strategies to reduce key drivers of inefficiency <b>Yes</b>	Implemented reforms to address identified drivers of financial protection (especially related to RMNCAH-N) <b>Not available</b>	
<b>Country has:</b> implemented or updated a resource mapping exercise <b>No</b>	Identified drivers of limited financial protection (especially in relation to RMNCAH-N services) <b>Yes</b>		

### EFFICIENCY

DTP3 dropout rate <b>7.6%</b>	ANC dropout rate <b>38%</b>
Health budget execution rate <b>Not available</b>	

World Bank-funded Project (IDA/IBRD/GFF)	
COUNTRY	Cameroon
BOARD DATE	5/3/16
GFF APPROVED AMOUNT	\$27M
IDA AMOUNT	\$100M

## Geographic Focus Areas



FOCUS AREAS

## Resource Mapping

