Resource Mapping

Cambodia's investment case is focused on three key issues: reducing newborn mortality, reducing child undernutrition, and decreasing adolescent fertility. The aim is to finalize the investment case by the end of 2019. Collaboration with the SUN Donor Network and the United Nations agencies is being established to link the ongoing initiatives on resource mapping with the investment case resource mapping exercise. The investment case identified a funding gap of US$53.56 million over five-years, of which 80% will be funded by a US$53 million project. Cambodia Nutrition project (2019-2024) financed by the Royal Government of Cambodia (US$12m), IFA (US$ 15m), GFF (US$10m), German KfW (US$5m), Australian DFAT (US$5m) and Health Equity and Quality Improvement Project MDIT with financing from Australian Aid, German KfW and KOICA (US$2m). A funding gap for adolescent health, pre-service and in-service training, EmONC, and other issues remains. Further investments from donors to align their work to reduce the remaining funding gap are pending.

Country Focus Areas

- Focus on reducing child undernutrition, neonatal mortality, and adolescent fertility, in seven priority provinces with large percentages of ethnic minorities.
- Support quality improvement and community health initiatives to increase coverage of good-quality RMNCAH-N services.
- Increase community awareness and demand for preventive, promotive, and curative health services.
- Address supply-side bottlenecks including low provider training and capacity, limited accountability for delivering health and nutrition services in adherence to clinical guidelines; and insufficient availability of necessary equipment, commodities, and supplies.
- Defragment RMNCAH-N financing and integrate service delivery within mainstream government systems and reforms to improve the coordination and sustainability of RMNCAH-N activities and interventions.

RMNCAH-N Core Indicators

- Maternal mortality ratio: 170 per 100,000 live births
- Neonatal mortality ratio: 18 per 1,000 live births
- Under-five mortality ratio: 35 per 1,000 live births
- Adolescent birth rate: 57 per 1,000 women
- Percent of births <24 months after the preceding birth: 13.3%
- Stunting among children under 5 years of age: 32.4%
- Moderate to severe wasting among children under 5 years of age: 9.6%

Health Financing Core Indicators

- Health expenditure per capita financed from domestic sources: US$16.94
- Ratio of government health expenditure to total government expenditures: 6.16%
- Percent of current health expenditures on primary/outpatient health care: 67.37%
- Incidence of catastrophic and impoverishing health expenditures: 19.97% catastrophic; 2.99% impoverishing

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Monitoring the Country-Led Process

- Investment Case
- Set of evidence
- Results monitoring
- Country-led multi-stakeholder platform
- Government focal point
- Health financing
- Private sector engagement
- Civil registration
- Management of medicines and supplies

SCORES

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* Both included in the IC document or a separate document
** Measuring if funding was allocated, disbursed and released – payment done
*** ANHE = annual health expenditure
**** ART = antiretroviral therapy
***** DOTS = directly observed treatment for tuberculosis
****** CRVS = civil registration and Vital Statistics
******* GFF = Global Fund to Fight AIDS, Tuberculosis and Malaria
*********** AIDS = acquired immunodeficiency syndrome
************ HIV = human immunodeficiency virus
************* MDCT = multisectoral development cooperation trust fund
************** ODA = official development assistance
*************** SNRC = Socioeconomic Network for Rural Communities
****************** SUN = Scaling Up Nutrition