

# Liberia



## Country Focus Areas

- **Reduce fragmentation** and better align financial support through improved resource mapping and tracking.
- **Build resilience**, improve capacity, and strengthen policies and system to reduce maternal and neonatal mortality and increase adolescent access to health services.
- **Improve the quality of care** in hospitals and the **utilization** of primary care while building the capacity of county health teams.
- **Expand civil registration service delivery points**, revise registration forms, develop registration manuals, strengthen death registration and recording and the coding of causes of death, and develop an integrated civil registration management information system.

## RMNCAH-N Core Indicators

Maternal mortality ratio: **1,072 per 100,000 live births**

Neonatal mortality ratio: **26 per 1,000 live births**

Under-five mortality ratio: **94 per 1,000 live births**

Adolescent birth rate: **149 per 1,000 women**

Percent of births <24 months after the preceding birth: **15.5%**

Stunting among children under 5 years of age: **32%**

Moderate to severe wasting among children under 5 years of age: **6%**

## Health Financing Core Indicators

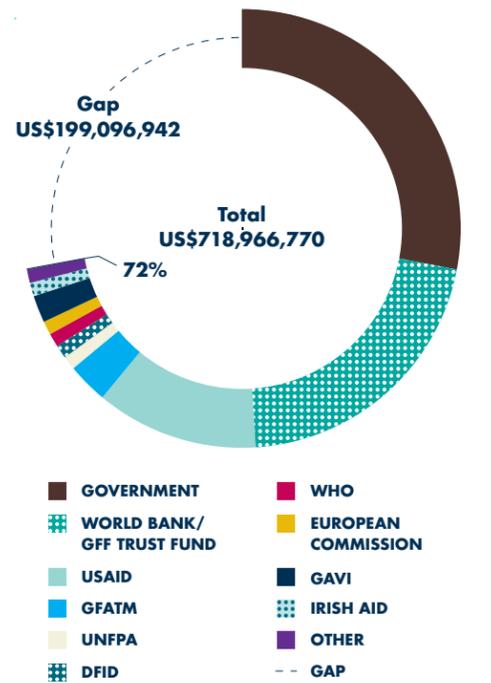
Health expenditure per capita financed from domestic sources: **US\$9.73**

Ratio of government health expenditure to total government expenditures: **3.86%**

Percent of current health expenditures on primary/outpatient health care: **67.71%**

Incidence of catastrophic and impoverishing health expenditures: **Not available** catastrophic **Not available** impoverishing

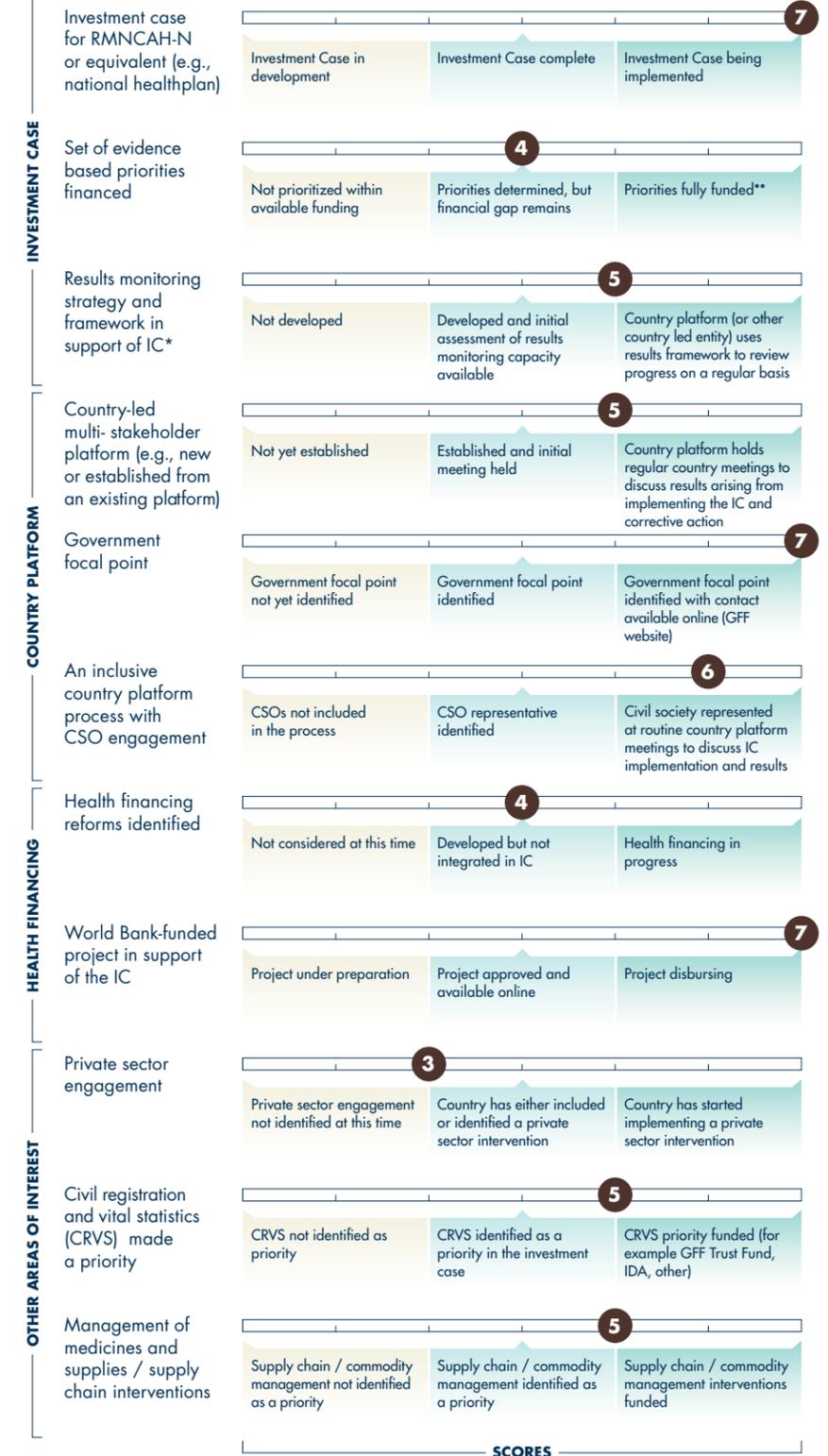
## Resource Mapping



Resource map completed in 2017

The resource mapping presented here covers FY 2016-2020. There are approximately 10 donors in Liberia that are aligned with and committed to investing in the IC. Domestic government resources account for approximately 28% of total financing for the IC. Liberia is committed to reducing the financing gap for the IC, both through resource mobilization and better use of existing financing. As such, there is an ongoing expenditure analysis focusing on how to improve efficiency of spending and strategic purchasing.

## 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.