

## CAMEROON

Cameroon has among the highest maternal mortality ratios in the world and over the past two decades it has dropped by only 20 percent, far below the MDG target. While under-five mortality has decreased in many regions of the country, it remains extremely high in the northern regions, which have rates about three times higher than the best performing regions.

The Ministry of Public Health in Cameroon has used GFF to address these challenges. Multiple ministries, bilateral agencies, UN agencies, and civil society organizations participated in a highly inclusive process to develop an Investment Case. After a rigorous analytical process that made use of UNICEF's EQUIST tool and that was also supported by the Primary Health Care Performance Initiative, the stakeholders reached consensus on an approach that used an equity lens to prioritize. This approach led to a focus on the parts of the country with the worst health indicators: three northern regions (which have lagged behind for a number of years, have recently been impacted by conflict related to Boko Haram, and have high numbers of refugees and internally displaced people) and the East region.

The Investment Case sets ambitious targets for the expansion of coverage of high-impact interventions such as family planning, emergency obstetric care, and immunizations, and as well as for broader health systems strengthening. In addition, it highlighted approaches from outside the health sector that are important for improving health outcomes, including an existing social safety net program that is being expanded to include cash transfers to encourage adolescent girls to stay in school and an education initiative to improve the performance of schools, which can contribute to reducing child marriage and early pregnancy.

As a result of this process, the government decided to increase the share of the health budget allocated to improve reproductive, maternal, newborn, child, and adolescent health from 6 percent to 25 percent between 2017 and 2020. Development partners—including the governments of France, Germany, and the United States, as well as Gavi, the Global Fund, the Islamic Development Bank, UNFPA, UNICEF, and WHO—have demonstrated their support for the process by aligning their financing with the priorities of the Investment Case.

The GFF Trust Fund is providing US\$27 million and IDA is providing US\$100 million to finance the priorities of the Investment Case. After a successful pilot, the government committed to scaling up performance-based financing nationwide to improve the efficiency and effectiveness of service delivery, and while the government has begun financing this from domestic resources, it would not be able to reach all of the priority regions without the resources from the GFF Trust Fund and IDA.

The government has also used the GFF process to strengthen engagement with the private sector. This process has involved considerable consultation with local private companies on how they can support the Investment Case rollout, as well as collaboration with international partners on funding the expansion of a highly impactful intervention—kangaroo mother care—through a development impact bond.

After the endorsement of the Investment Case at the central level, workshops were held in the regions to ensure local ownership over the process, with strategic activities included in the Investment Case being embedded in the district health plans. These plans are being prepared in the context of the National Health Development Plan (PNDS), showing close alignment and synergies between the Investment Case and PNDS planning processes.

The GFF process has helped to bring all partners together in the joint platform, enhancing collaboration and strategy alignment at the regional level. For example, the GFF process facilitated the identification of synergies between a health voucher initiative supported by the French and German governments and a performance-based financing program that strengthens health services supported by the World Bank Group.

The GFF process has also brought more focus to issues around the longer-term financing of the health sector, which is a pressing issue given the fact that a majority of health spending in the country is out-of-pocket expenditure by households. The country's first health financing strategy, which explicitly looks at financing for universal health coverage, is nearing completion after a rigorous process that included studies on the fiscal space for health, public financial management, and the political economy of health financing reforms.

Overall, Cameroon has shown how a country that takes ownership of the GFF process can use the approach to identify priority areas and then build alignment of a broad set of stakeholders around these priorities. As a result, the country is now in a stronger position to achieve the SDGs.