

EAST ASIA AND PACIFIC REGION – LAO PDR

Health Governance and Nutrition Development Project

BACKGROUND

While some of Lao PDR's key health indicators have improved significantly over the past few decades, significant challenges remain. Of children under five years of age, almost half are stunted (meaning they have low height for their age); more than a quarter are underweight, and six percent are wasted (meaning they have low weight for their height). A skilled birth attendant is present at less than half of all births in Lao PDR - a critical factor in preventing maternal mortality. In rural areas of Laos, more than 60 percent of women say they do not want more children.

The Lao Government has introduced free care for maternal and child health which has helped to reduce financial barriers to healthcare. However, problems with the availability of quality health services remain.

PROJECT DEVELOPMENT OBJECTIVE

To help increase coverage of reproductive, maternal and child health, and nutrition services in target areas. Specifically, the project will assist the Government to implement its Health Sector Reform Framework, by:

- Developing an improved health management information system, including a system for civil registration and vital statistics, which can be used to inform policy direction and resource allocation.
- Reducing stunting and wasting by increasing the percentage of infants who are exclusively breastfed.
- Improving nutrition through the development of a national behavior change communications strategy that will target infant and young child feeding practices, amongst other objectives.
- Addressing maternal mortality in multiple ways, including by increasing the number of women who have access to family planning, who receive sufficient antenatal care visits and who deliver their children with a skilled birth attendant.
- Addressing infant mortality through initiatives including well baby clinic services and outreach visits.

ACTIVITIES

Component 1 (USD 0.5 million): *Health Sector Governance Reform*. This component supports:

- Development, implementation and maintenance of an improved health management information system (HMIS) for the Ministry of Health; technical support, capacity building and training for Ministry of Health staff at the central, provincial and district levels in the use of the system.
- Development and implementation of improved business processes for notification of births, and training for Ministry of Health staff in the use of the system.



Component 2 (USD 19.4 million): *Service Delivery*. This Component supports the Government to strengthen maternal, newborn, child health, and nutrition services and to expand coverage of health equity funds to provide financial protection for the poor. The Component has one sub-Component for support to the Provinces, and one sub-Component for support to the Central level. Financing from the World Bank is provided based on results which are tracked through a set of Disbursement Linked Indicators (DLIs). If all DLIs are met, financing to the provinces would be in the order of US\$0.60 per capita. This would be sufficient to cover the free maternal and neonatal health services estimated to cost US\$0.51 per capita.

Component 3 (USD 4 million): *Social and Behavior Change Communication*. Funding to the multi-sector response is proposed for two aspects:

- Preparation of a national strategy for social and behavior change communication
- Support for the implementation of social and behavior change communication at the village level in a selected number of high priority districts ¹.

Component 4 (USD 2.5 million): *Project Management, Monitoring and Evaluation*.

PROJECT BENEFICIARIES

The project is expected to benefit approximately **1 million pregnant women, family planning users, and children age 0 to 23 months**, across 14 provinces. In addition, children in high priority nutrition districts will benefit from intensive social and behavior change communication.

FINANCING AND IMPLEMENTATION ARRANGEMENTS

World Bank / International Development Association (mix of grant and credit): **USD 26.4 million**

In addition, the Asian Development Bank also provides USD 20 million in parallel financing.

- Implementation period: October 2015 to September 2020 (5 years)
- Implementing agency: Department of Planning and International Cooperation, Ministry of Health

The project was developed with the close cooperation and support of UNICEF and the World Health Organization.

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1. The priority districts are identified in the Multisector Food and Nutrition Security Action Plan