

»» Project Information

Implemented by:



Healthcare vouchers • Cambodia

Good care particularly for mothers

The Cambodian healthcare system is patchy and in a bad state, especially in rural areas. There is a lack of nationwide state facilities and many of those living in poverty are unable to afford private treatment. The current life expectancy for children born today is 60 years for boys and 65 years for girls. This is due in part to a high child and maternal mortality rate, a lack of family planning services and a non-existent health insurance scheme. For this reason, KfW is supporting the Cambodian Ministry of Health, on behalf of the German government, in launching an insurance mechanism for the poor based on a voucher system.

Context

In the past years, care in Cambodia has improved slightly • as shown by some indicators. All the same, 170 women per 100,000 live births die in Cambodia, more than in most other Association of Southeast Asian Nations states. Child mortality at 45 children per 100,000 live births is also very high. There are numerous reasons for this: Even today every second woman gives birth at home. Every fourth woman does not see a doctor or a qualified midwife during pregnancy. This is because there is no health insurance, which means that pregnant women from poor families in particular cannot afford to be treated by qualified medical professionals in well-equipped healthcare facilities.

Project approach

KfW has supported the Ministry of Health for more than ten years in family planning issues, as well as mother and child health. It has financed a family planning pro-

gramme which included providing contraceptives and medicines and training midwives. KfW has invested in an insurance system since 2009. The scheme aids mothers, in particular, to access qualified ante-natal and post-natal treatment from qualified healthcare professionals using vouchers. The voucher scheme also benefits elderly and disabled people.

A voucher is made up of several coupons which enable the bearer to access qualified treatment in state and private healthcare facilities. In addition to a birth attended by a professional, mothers can use them for four ante-natal and three post-natal examinations, which

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Country/Region	Cambodia
Lead executing agency	Ministry of Health (MoH)





NGO worker at an information event. Source: Voucher Management Agency (Action for Health)

include special treatment in hospitals if complications occur. Furthermore, men and women can receive advice in matters of family planning. Children up to the age of two can also be treated for malnutrition. If the women agree to a family counselling session, coupons can be used for free terminations. Women suspected of having cervical cancer and people with cataracts can also be treated free of charge on production of a voucher. The medical care covers transport costs and ancillary hospital costs (bed and meals).

Impact

The Ministry of Health is implementing the programme and is being supported in its work by the Voucher Management Agency (VMA). This consists of an internationally experienced consulting company and a local non-governmental organisation (NGO), which is well established in the region. In doing so, the Ministry of Health is tapping into international knowledge of health issues and also ensuring that the medical help is being implemented effectively by the NGO at a local level.

Healthcare advisors or promoters travel through the individual villages and explain the benefits of professional medical care to the local population. They distribute vouchers and inform the people about the rights afforded to them in the voucher system. They are also available as contacts during treatment and ensure that patients are well treated. Through this new form of insurance many poor families are, for the first time, able to access qualified medical help.

KfW not only promises efficient and friendly service through this concept, but also a continual improvement in service quality. Using a points system, the Ministry of Health decides which medical facilities are permitted to treat voucher patients. The system assesses the equipment, staff qualifications and the quality of treatment at the facilities. In this way, facilities which qualify for the programme secure new patients and a stable source of income via the vouchers. In the best cases, they expand their practices and facilities, purchase new equipment and hire qualified staff.

For some of the vouchers on offer, the voucher patients themselves can choose whether they would prefer to be treated in a qualified state or private medical facility.

This strengthens the competition to the benefit of the patients.

Within the framework of the planned programme term from 2009 to spring 2018, the advisors/promoters will visit an estimated 4,700 villages and inform around 250,000 people on the benefits of the health system. Furthermore up to now some 300,000 voucher services have been financed.

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Contact

KfW Group
KfW Development Bank
Palmengartenstrasse 5-9
60325 Frankfurt am Main, Germany
Phone +49 69 7431 -4123
hannah.wiese@kfw.de

KfW Office Phnom Penh
#17-23, Street 306 Boeung Keng Kang 1
Phnom Penh
Cambodia
kfw.phnompenh@kfw.de