

Cambodia

**Maternal, Newborn &
Child Survival**

November 2008

Cambodia

DEMOGRAPHICS

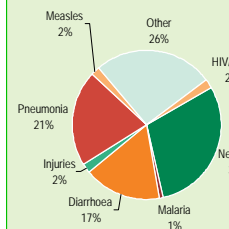
Total population (000)	14,444	(2007)
Total under-five population (000)	1,708	(2007)
Births (000)	382	(2007)
Under-five mortality rate (per 1000 live births)	91	(2007)
Infant mortality rate (per 1000 live births)	70	(2007)
Neonatal mortality rate (per 1000 live births)	48	(2004)
Total under-five deaths (000)	35	(2007)
Maternal mortality ratio (per 100,000 live births)	540	(2005)
Lifetime risk of maternal death (1 in N)	48	(2005)
Total maternal deaths (number)	2,300	(2005)



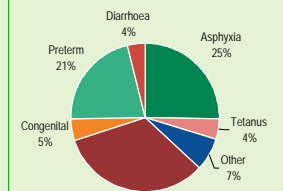
Causes of under-five deaths

Globally more than one third of child deaths are attributable to undernutrition

Causes of under-five deaths



Causes of neonatal deaths



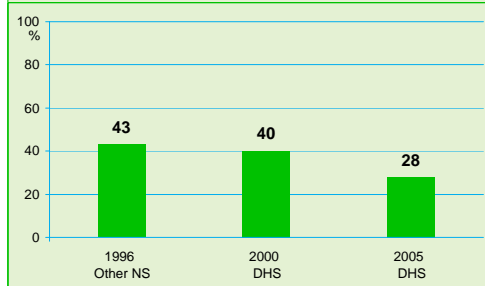
INTERVENTION COVERAGE FOR MOTHERS, NEWBORNS AND CHILDREN

NUTRITION 1

Stunting prevalence (based on 2006 WHO reference population, moderate and severe, %)	42	(2005)	Wasting prevalence (based on 2006 WHO reference population, moderate and severe, %)	9	(2005)	Complementary feeding rate (6-9 months, %)	82	(2005)
Stunting prevalence (based on NCHS/WHO reference population, moderate and severe, %)	37	(2005)	Wasting prevalence (based on NCHS/WHO reference population, moderate and severe, %)	7	(2005)	Low birthweight incidence (%)	14	(2005)

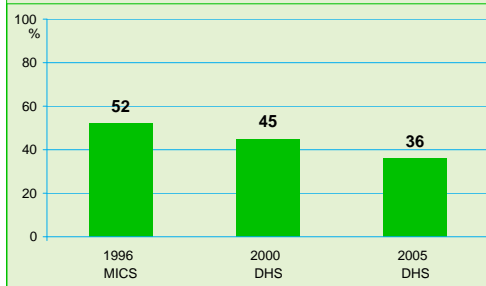
Underweight prevalence

Percent children < 5 years underweight for age
Based on 2006 WHO reference population



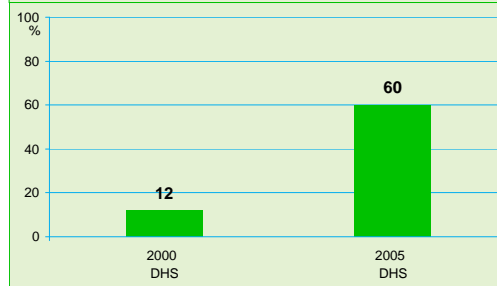
Underweight prevalence

Percent children < 5 years underweight for age
Based on NCHS/WHO reference population



Exclusive breastfeeding

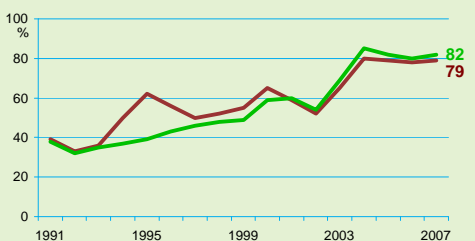
Percent infants < 6 months exclusively breastfed



CHILD HEALTH

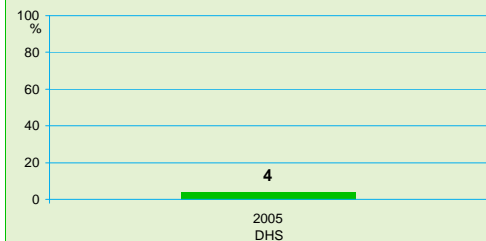
Immunisation

Percent of children immunised against measles
Percent of children immunised with 3 doses DPT
Percent of children immunised with 3 doses of Hib



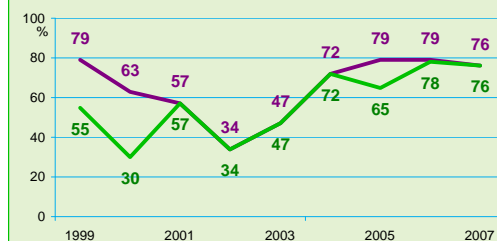
Malaria prevention

Percent children < 5 years sleeping under ITNs
Malaria endemicity is generally not a national problem in Asia



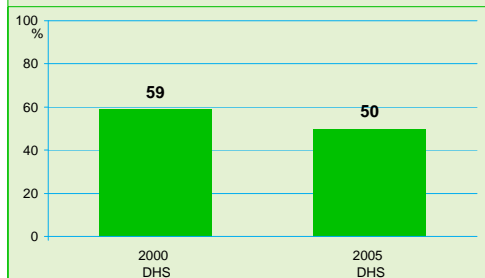
Vitamin A supplementation

Percent children 6-59 months receiving vitamin A doses
At least one dose (purple line)
Two doses (green line)



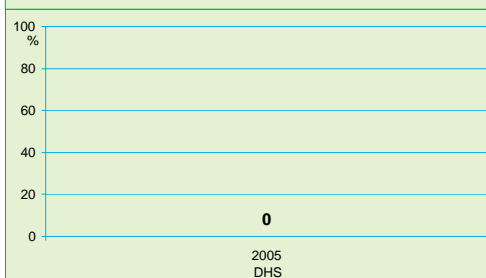
Diarrhoeal disease treatment

Percent children < 5 years with diarrhoea receiving oral rehydration therapy or increased fluids, with continued feeding



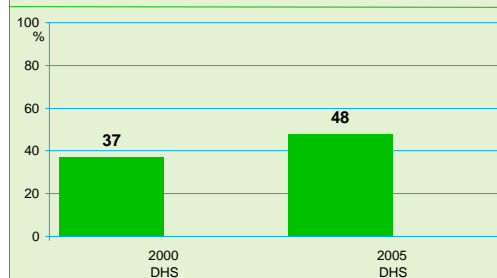
Malaria treatment

Percent febrile children < 5 years using anti-malarials
Malaria endemicity is generally not a national problem in Asia



Pneumonia treatment

Percent children < 5 years with suspected pneumonia taken to appropriate health provider
Percent children < 5 years with suspected pneumonia receiving antibiotics



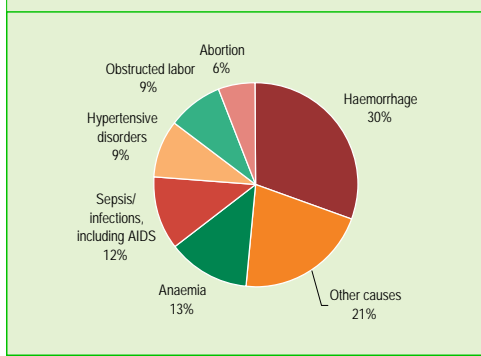
Cambodia

MATERNAL AND NEWBORN HEALTH

Proportion of women with low BMI (< 18.5 Kg/m ² , %)	20	(2005)
Unmet need for family planning (%)	25	(2005)
Total fertility rate	3.2	(2007)
Adolescent birth rate (births per 1000 woman aged 15-19 yr)	44	(2006)
Antenatal visit for woman (4 or more visits, %)	27	(2005)
Early initiation of breastfeeding (within 1 hour of birth, %)	35	(2005)
Institutional deliveries (%)	22	(2005)
Postnatal visit for baby (within 2 days for home births, %)	-	-
Postnatal visit for mother (within 2 days, %)	64	(2005)

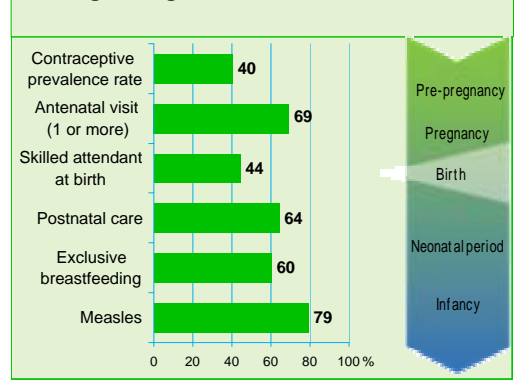
Causes of maternal deaths

Regional estimates for Asia, 1997-2002



Source: Khan, Khalid S., et al, Lancet 2006;367:1066-74

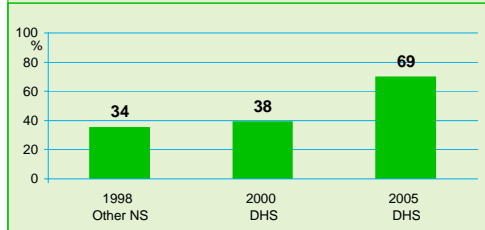
Coverage along the continuum of care



Source: DHS, MICS, Other NS

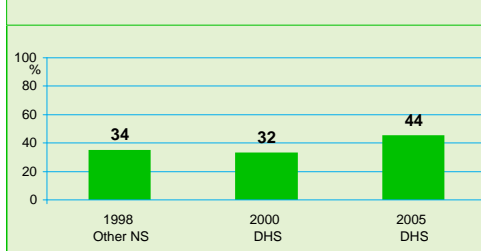
Antenatal care

Percent women aged 15-49 years attended at least once by a skilled health provider during pregnancy



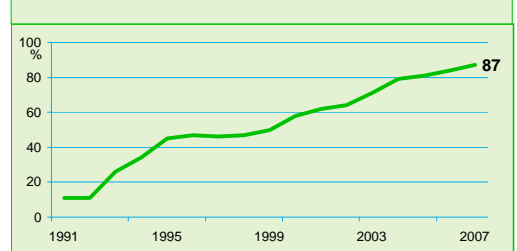
Skilled attendant at delivery

Percent live births attended by skilled health personnel



Neonatal tetanus protection

Percent of newborns protected against tetanus



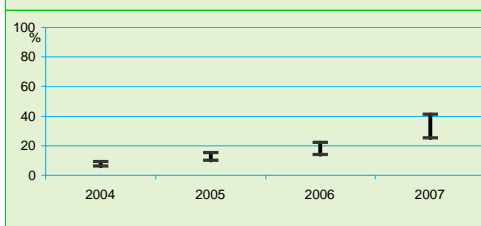
Source: WHO/UNICEF

HIV AND AIDS

HIV prevalence among young women (15-24 yrs, %)	0.3	(2007)
HIV prevalence among young men (15-24 yrs, %)	0.8	(2007)
HIV+ children using ART (number)	2541	(2007)
Orphan school attendance ratio	0.83	(2005)

Prevention of mother to child transmission of HIV

Percent HIV+ pregnant women receiving ARVs for PMTCT



Source: MOH/UNAIDS/WHO

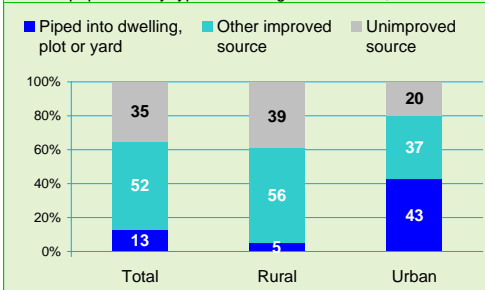
EDUCATION

Survival rate to last grade of primary school (administrative data)	49	(2006)
Survival rate to last grade of primary school (survey data)	92	(2005-2006)
Primary school net enrolment or attendance ratio (total)	90	(2006)
Primary school net enrolment or attendance ratio (% male)	91	(2006)
Primary school net enrolment or attendance ratio (% female)	89	(2006)

WATER AND SANITATION

Drinking water coverage

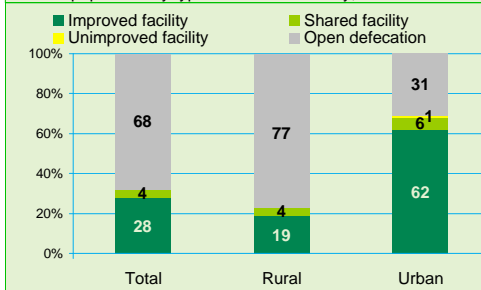
Percent population by type of drinking water source, 2006



Source: WHO/UNICEF JMP, 2008

Sanitation coverage

Percent population by type of sanitation facility, 2006



Source: WHO/UNICEF JMP, 2008

CHILD PROTECTION

Women aged 20-24 years who were married or in union by age 18 (%)	23	(2005)
Birth registration (%)	66	(2005)

POLICIES

International Code of Marketing of Breastmilk Substitutes	Partial	(2008)
New ORS formula and zinc for management of diarrhoea	Yes	(2008)
Community treatment of pneumonia with antibiotics	Partial	(2008)
IMCI adapted to cover newborns 0-1 week of age	Yes	(2008)
Costed implementation plan(s) for maternal, newborn and child health available	Partial	(2008)
Midwives to be authorised to administer a core set of life saving interventions	No	(2008)
Maternity protection in accordance with ILO Convention 183	No	(2008)
Specific notification of maternal deaths	Partial	(2008)

SYSTEMS

Financial Flows and Human Resources

Per capita total expenditure on health (US\$)	167	(2006)
General government expenditure on health as % of total government expenditure (%)	12	(2005)
Out-of-pocket expenditure as % of total expenditure on health (%)	60	(2005)
Density of health workers (per 1000 population)	1.1	(2000)
Official Development Assistance to child health per child (US\$)	7	(2005)
Official Development Assistance to maternal and neonatal health per live birth (US\$)	22	(2005)
National availability of Emergency Obstetric Care services (%)	-	-

DISPARITIES IN INTERVENTION COVERAGE ²

Indicator	Total	Gender			Residence			Wealth Quintile						Source
		Male	Female	Ratio of Male to Female	Urban	Rural	Ratio of Rural to Urban	Poorest	Second	Middle	Fourth	Richest	Ratio of Richest to Poorest	
NUTRITION ¹														
Low birthweight incidence (%)	14	-	-	-	12	14	1.2	17	15	13	12	10	0.6	DHS 2005
Underweight prevalence (based on 2006 WHO reference population, %)	28	29	27	1.1	27	28	1.0	35	32	27	28	16	0.5	DHS 2005
Underweight prevalence (based on NCHS/WHO reference population, %)	36	35	36	1.0	35	36	1.0	43	40	34	34	23	0.5	DHS 2005
Stunting prevalence (based on 2006 WHO reference population, %)	42	45	40	1.1	34	44	1.3	52	48	44	38	23	0.4	DHS 2005
Stunting prevalence (based on NCHS/WHO reference population, %)	37	-	-	-	-	-	-	-	-	-	-	-	-	DHS 2005
Wasting prevalence (based on 2006 WHO reference population, %)	9	9	8	1.1	9	9	1.0	11	10	7	6	8	0.7	DHS 2005
Wasting prevalence (based on NCHS/WHO reference population, %)	7	-	-	-	-	-	-	-	-	-	-	-	-	DHS 2005
Exclusive breastfeeding (0-5 months, %)	60	-	-	-	-	-	-	-	-	-	-	-	-	DHS 2005
Complementary feeding (6-9 months, %)	82	-	-	-	-	-	-	-	-	-	-	-	-	DHS 2005
CHILD HEALTH														
Careseeking for pneumonia (%)	48	48	49	1.0	49	48	1.0	41	42	60	62	-	-	DHS 2005
Antibiotic use for pneumonia (%)	-	-	-	-	-	-	-	-	-	-	-	-	-	-
ORT (ORS or RHF) or increased fluids, with continued feeding (%)	50	51	48	1.1	45	51	1.1	56	51	52	43	37	0.7	DHS 2005
Children sleeping under ITNs (%)	4	4	4	1.0	2	5	2.5	8	5	4	1	1	0.1	DHS 2005
Children with fever receiving any anti-malarial medicines (%)	0	-	-	-	1	0	-	0	0	0	1	0	-	DHS 2005
MATERNAL AND NEWBORN HEALTH														
Proportion of women with low BMI (< 18.5 Kg/m ² %)	20	-	-	-	17	21	1.2	24	23	23	18	17	0.7	DHS 2005
Antenatal care coverage at least one visit (%)	69	-	-	-	79	68	0.9	55	64	69	78	90	1.6	DHS 2005
Antenatal care coverage (4 or more visits, %)	27	-	-	-	-	-	-	-	-	-	-	-	-	BGD 2005
Skilled attendant at delivery (%)	44	-	-	-	70	39	0.6	21	29	40	62	90	4.3	DHS 2005
Early initiation of breastfeeding (%)	35	33	37	0.9	38	35	0.9	29	30	38	43	42	1.4	DHS 2005
WATER AND SANITATION ³														
Use of improved drinking water sources (%)	65	-	-	-	80	61	0.8	48	61	67	67	79	1.6	WHO/UNICEF JMP 2008
Use of improved sanitation facilities (%)	28	-	-	-	62	19	0.3	0	2	4	29	81	-	WHO/UNICEF JMP 2008
EDUCATION														
Survival rate to last grade of primary school (administrative data, %)	49	50	49	1.0	55	49	0.9	-	-	-	-	-	-	Other NS 2006
Survival rate to last grade of primary school (survey data, %)	92	92	92	1.0	93	92	1.0	90	87	92	95	96	1.1	DHS 2005-06
Primary school net enrolment or attendance ratio	90	91	89	1.0	-	-	-	-	-	-	-	-	-	UIS 2006
CHILD PROTECTION														
Women aged 20-24 years who were married or in union by age 18 (%)	23	-	-	-	18	25	1.4	29	26	25	23	16	0.6	DHS 2005

Note: The format for this Country Profile has been adapted from the Countdown to 2015, 2008 report (UNICEF, 2008). Coverage data have been largely derived from national household surveys such as the Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS). For the majority of coverage indicators, UNICEF global databases were used. Other organizations such as the World Health Organization, UNAIDS, United Nations Population Fund, London School of Hygiene and Tropical Medicine and Saving Newborn Lives also provided data. Details on indicators, data sources, and definitions of indicators, can be found at www.childinfo.org.

1. Anthropometric indicators - Reference Standards for Underweight, Stunting and Wasting New international Child Growth Standards for infants and young children were released by WHO in 2006, replacing the older NCHS/WHO reference population. During this transition period, the Country Profile provides underweight, stunting and wasting data based on both the 2006 WHO reference population and the older NCHS/WHO reference population, where available. In using the 2006 WHO reference population, estimates generally change in the following manner: stunting is greater throughout childhood; underweight rates are higher during the first half of infancy and lower thereafter; and, wasting rates are higher during infancy.

2. Disparities. Disparity information is only available for data directly derived from household surveys such as MICS and DHS. Therefore, disparity data are not available for the following indicators: mortality, vitamin A supplementation, immunization, and for HIV/AIDS. In addition, neither UNICEF Global Databases nor databases from partner organizations maintain disparity data for the following indicators: total fertility rate, unmet need, institutional deliveries, contraceptive prevalence, adolescent birth rate.

3. Water and sanitation wealth quintile data are derived from a MICS or DHS survey from 2005 or 2006. Urban, rural and total coverage estimates provided are for 2006 and are those published by the WHO/UNICEF Joint Monitoring Program for Water Supply and Sanitation.