Health System in Cambodia

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Abstract: In the past few years, the Ministry of Health in Cambodia updated their organizational structure and due to the dramatic economic growth, Cambodia has observed a significant health status improvement. most widespread health problems now in Cambodia are malaria, tuberculosis, diarrheal diseases and malnutrition

Paper Outlines:

- 1. Health system history breakdown.
- 2. Major health issues faced the health system throughout the years.
- 3. Cambodia Millennium Development Goals (CMDGs).

1. Health system history breakdown:

1960s to 1975:

population expansion happened from east to west, and from countryside to urban areas (1). Therefore, the population in Phnom Penh increased from around 25,000 to more than one million (1).

1975 to 1978:

The Khmer Rouge decided and insisted on returning Cambodian to a model of agrarian culture (1), there were continuous population shifts from urban regions all through the nation (1). All health services were destroyed, for instance, equipment, supplies, and workforce, alongside other important facilities: transportation, electricity, water, sanitation, and watering system (irrigation) (1). One of the most devastating losses was individuals; of a population around 7 million, 1 to 3 millions are assumed to have died under Khmer Rouge principles and rules (1). A considerable number of those who have died were individuals with higher education and degrees (1). 45 physicians survived, and of those, 20 left Cambodia. Only 26 pharmacist, 28 dental practitioners, and 728 medical students remained in Cambodia in 1979 (1).

1979:

- People who lived in remote villages and urban areas couldn't reach the health care facilities. Experienced physicians and health professionals from Phnom Penh

- usually lived in distant locations from the urban sides, this alongside the geographical and physical barriers made it hard for villagers to seek medical help (1). Many areas did not have enough medical supplies including antibiotics and other medicines (1). Also, due to the improper cold storage facilities and transportation problems, vaccine distribution was almost impossible (1).
- Absence of sufficient clean water, lack of sanitation, education, transportation, and communication have brought on critical issues in the advancement of health framework. The most widespread infections in Cambodia today are caused by water and sanitation (1).
- Individuals who moved from the rural areas to Phnom Penh were not so familiar with the urban living. Endeavors are still being made to teach the people about hygiene, health and wellbeing (1).

Up to the early 1980s:

- In theory, health care is free for all. However, there are actually numerous charges for administrations, and when supplies are inaccessible in clinics, the patient must buy them (1). Every region has a different plan, and regions get different amounts of help from the humanitarian agencies (1).
- Cambodia's health framework relied on the Vietnamese experienced professionals who lived within the country; the health framework during these years mimicked the Vietnamese model, with vestiges of the old French framework (1). Most significant

health centers and facilities in Phnom Penh and few clinics in the areas are aided by medical groups, from both Western and Eastern sides of the country (1).

- Despite the fact that there are efforts being done to facilitate administrations and coordination services with the Red Cross groups, the NGOs and UN officials, there are some correspondence troubles and difficulties (1).

In 1991:

Under the Strengthening Health Systems Project, Cambodia began its health sector change (2). WHO is assumed to be a basic important part in this change by giving support to Cambodia and its Ministry of Health (2)

In the past few years, the Ministry of Health updated their organizational structure (figure 2) (2). Also, due to the dramatic economic growth, Cambodia has observed a significant health status improvement. (3)

2. <u>Major health issues faced the health</u> system throughout the years:

- According to the dean of the faculty of Medicine Dr. MySamed, most widespread health problems now in Cambodia are malaria, tuberculosis, diarrheal diseases and malnutrition (1)
- o Focusing on children health: In 1985, a framework was intended to focus on children less than five years old who were experiencing hunger, dehydration and diarrhea. Focuses were built for rehydration, vaccination (immunization), nourishment and education (RINE Centers) (1).
- o In 1989 there were 10 centers in Phnom Penh, and nine in all the regions. There is likewise an arrangement of daycare centers "crèches," which expanded from one in 1981 to 81 focuses in 1987 (1).

3. <u>Cambodia Millennium Development</u> <u>Goals (CMDGs) (figure1):</u>

In 2010, The Ministry of Planning (MoP) in Cambodia released an updated document for the last original CMDG document that was conducted and published in 2007 (4). The current years are internationally critical for Cambodians and Cambodia's health system and are an important benchmark to achieve the CMDG by 2015 (see figure 2) (4).

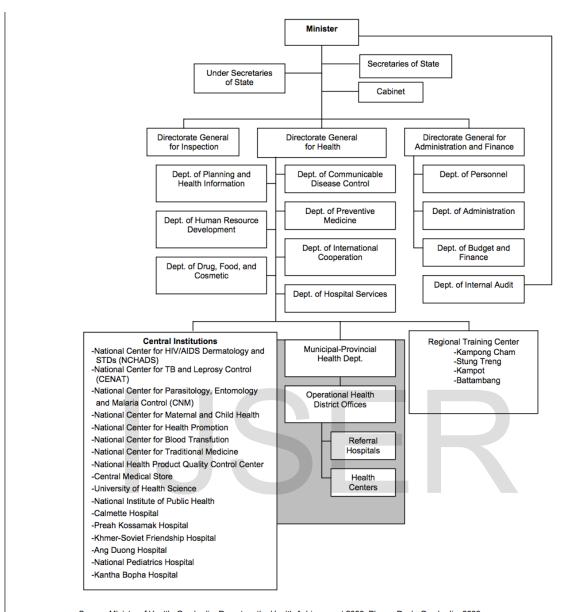
Cambodia Millennium Development Goals

- Goal 1: Eradicate extreme poverty and hunger

 Goal 2: Achieve universal primary education
- Goal 3: Promote gender equality and empower women
- Goal 4: Reduce child mortality
- Goal 5: Improve maternal health
- Goal 6: Combat HIV/AIDS, malaria and other diseases
- Goal 7: Ensure environmental sustainability
- Goal 8: Forge a global partnership for development
- Goal 9: De-mining, ERW and victim assistance

Figure (1): Cambodia's Millennium Development Goals.

Resource: Ministry of Planning (4)



Source: Ministry of Health, Cambodia. Report on the Health Achievement 2008. Phnom Penh, Cambodia, 2008.

Figure (2): Organizational structure of the Ministry of Health in Cambodia (2)

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- Ministry of Planning published this document to update their original document about the planned CMDG to be achieved in 2015.